



ASSOCIATED STUDENTS, INC.
5154 STATE UNIVERSITY DRIVE, ROOM 203
LOS ANGELES, CA 90032

Book Voucher Program Application
Spring 2020/Fall Semester 2019

Please review the criteria listed below before continuing with this application. Only students that meet these criteria and have submitted all of the appropriate documentation will be considered for the book voucher program.

Application Deadline is Friday, January 10, 2020 August 09, 2019 by 6:00 p.m.

Book Voucher Criteria for Cal State LA STUDENTS:

1. Must have completed at least one (1) semester at Cal State L.A.
2. Must have a cumulative Cal State LA G.P.A. of 2.54 for undergraduate or higher 3.0 for graduate or higher. (Submit complete copy of Unofficial Transcripts)
3. Must be enrolled in at least three (3) units of evening courses at Cal State LA for **Spring/Fall Semester 2020/19**.
4. Must be employed at least twenty-hourly (2030) hours per week and provide employment verification. (A letter from your employer indicating your work hours.) Any letter verifying employment must be printed on company letterhead.
5. Please supply a print out of your class schedule from the campus website or provide from the registrar's office proof of enrollment for the Semester in which you are applying for the Book Voucher. (WeeklyLandscape format please.)
6. Verification of your cumulative Cal State LA G.P.A. attached. (Listed on Unofficial Transcripts.)
7. If awarded a voucher it must be redeemed by Friday, September 06, 2019 January 31, 2020, or it will be forfeited.
8. All ASI employed students and ASI Board of Directors members are exempt from participating in the program.

***NOTE: There will be no incomplete applications accepted or stamped by the ASI Office, U-SU Room 203.

*****NOTE: Due to limited funding, not all eligible applicants will be awarded a book voucher.

Commented [MA11]: Reduced hours work per week to 20 hours to now include students working on campus. Since 20 hours a week is the max a student can work.

Applicant Information

Name: _____
Last First Middle

Mailing Address: _____
Number and Street (include apt #)

City State Zip
Primary Telephone Number: () _____ Alternate Number: () _____

Cal State L.A. E-mail: _____@Calstatela.edu (Only)

Campus Identification Number (CIN): _____ (SSN will not be accepted)

Grade Point Average: _____ No. of Quarters/Semesters Completed at Cal State LA: _____

What time do you attend your evening class at Cal State LA? (Check one) 4:30 pm-5:45pm or 6:00pm-8:45pm

How many hours per week do you work? _____

Your year in college during the 2019-20 academic year (check one): 1st 2nd 3rd 4th Graduate Student

PLEASE SUBMIT COMPLETED APPLICATION WITH VERIFICATION OF EMPLOYMENT AND INCLUDE DOCUMENTATION OF AT LEAST A 2030 HOUR WORK WEEK.

Signature _____

Date _____

Return, Mail or Fax Applications to:
ASI Administration Office, U-SU #203
5154 State University Drive, Los Angeles 90032
Tel.: (323) 343-4778 / Fax: (323) 343-6420

323.343.4780
FAX: 323.343.6420

WWW.CALSTATELA.EDU/ASI

CALIFORNIA STATE UNIVERSITY, LOS ANGELES
FOR THE STUDENTS, BY THE STUDENTS.