

**STUDENT GIFT CARD ISSUANCE REQUEST** *(To be completed by District Staff)*
**I. STUDENT & PROGRAM INFORMATION**
**Student Name:** \_\_\_\_\_ **Student ID:** \_\_\_\_\_

**Student Email:** \_\_\_\_\_

**Requesting Program:**  Basic Needs  EOPS  NextUp  CalWORKs  Other: \_\_\_\_\_

**Date of Request:** \_\_\_\_\_ **Requested By (Name & Title):** \_\_\_\_\_

**II. GIFT CARD SELECTION & ISSUANCE LOG**
*Indicate all cards to be issued. Cashier/Issuer to record Card ID, Initials & Date at time of distribution.*

Select	Vendor	Amount (\$)	Card Issuance		
			Card # (Last 4)	Cashier Initials	Date
<input type="checkbox"/>	Rideshare: _____	\$_____			
<input type="checkbox"/>	Fuel: _____	\$_____			
<input type="checkbox"/>	Groceries: _____	\$_____			
<input type="checkbox"/>	Clothing: _____	\$_____			
<input type="checkbox"/>	Barnes & Noble (Bookstore)	\$_____			
<input type="checkbox"/>	Vehicle Maint.: _____	\$_____			
<input type="checkbox"/>	Other: _____	\$_____			
<input type="checkbox"/>	Other: _____	\$_____			

**III. JUSTIFICATION FOR SUPPORT**
**Category of Need:**  Transportation  Food  Housing  Hygiene  Childcare/Family

 Educational Supplies  Other: \_\_\_\_\_

**Brief explanation** of the student's documented need & how the gift card supports their academic success:

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**IV. APPROVALS**

I certify this request complies with program guidelines and student eligibility is on file.

**Director/Dean Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Reference: AP6300, CA Government Code 89501, CA Constitution Article 16, Section 6, C.F.R Section 1.132-6(c), C.F.R section 1.61-2(d)(1), IRS Publication 5137

**GIFT CARD ACCEPTANCE, WAIVER & TAX ACKNOWLEDGEMENT** *(To be completed by Student)*

I, \_\_\_\_\_ (Student Name) \_\_\_\_\_ acknowledge receipt of the Gift Card(s) listed on the Student Gift Card Issuance Request (page 1) from Antelope Valley Community College District (“District”). By accepting the Gift Card(s), I understand and agree to the following terms:

1. **ACCEPTANCE:** I understand that acceptance of the Gift Card(s) is not mandatory and I do so of my own free will.
2. **AUTHORIZED USE:** I agree to use the provided Gift Card(s) exclusively for the specific personal needs (e.g., food, transportation, supplies) identified in the Student Gift Card Issuance Request (page 1). I acknowledge that any use of the Gift Card for purposes other than those stated, or in violation of District policies or the specific Vendor’s terms and conditions, is strictly prohibited.
3. **REIMBURSEMENT FOR MISUSE:** In the event the District discovers unauthorized use, I agree to promptly reimburse the District for the original balance of the Gift Card(s). If reimbursement is not made within fourteen (14) calendar days of notification, I understand the District reserves the right to place a hold on my student account.
4. **NO REFUNDS:** I understand that if a Gift Card has an expiration date, any unused balance after that date will not be refunded or reimbursed.
5. **RIDESHARE & LIABILITY RELEASE:** If receiving a Gift Card for transportation/rideshare services, I hereby release, indemnify, and hold harmless Antelope Valley Community College District, its Board of Trustees, officers, agents, and employees from any claims, liability, injuries, or damages arising out of my use of these services. I understand the District is acting solely as the provider of the card and is not responsible for the safety or performance of the transportation/rideshare provider.
6. **TAX ACKNOWLEDGEMENT (Form 1099-MISC):**
  - I understand that gift cards are considered cash-equivalent assistance under IRS regulations.
  - I understand that certain gift cards may be considered “financial aid” and reported to the District’s Financial Aid office.
  - I understand that if the total value of gift cards I receive from the District equals or exceeds \$2,000 in a calendar year, the District may be required to issue me a Form 1099-MISC.
  - I understand that receiving a Form 1099-MISC does not automatically mean I owe taxes or must file a return; filing requirements depend on my total annual income and dependency status.
  - I understand the District does not provide tax advice and I should consult a professional if needed.
7. **GOVERNING LAW:** This Agreement shall be governed by and construed in accordance with the laws of California, Los Angeles County.

**I have read this agreement, understand its contents—including the release of liability and tax implications—and voluntarily accept the Gift Card(s).**

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Reference: AP6300, CA Government Code 89501, CA Constitution Article 16, Section 6, C.F.R Section 1.132-6(c), C.F.R section 1.61-2(d)(1), IRS Publication 5137