



OUT-OF-STATE TUITION WAIVER FOR MILITARY & OTHER MEMBERS OF A QUALIFYING FEDERAL SERVICE

Section I - Student Information

First Name: _____ Middle Initial: _____ Last Name: _____

Address: _____

Street address or apartment number

City

State

Zip code

Email: _____ Phone: _____

GTID Number: _____ Semester Applying: _____

Fall/Spring/Summer

Year

Current status of military sponsor*:

- ☐ Active Duty (military or foreign service)
 ☐ Georgia National Guard
 ☐ Retired or Separated Military
☐ Officer or employee of the intelligence community
 ☐ U.S. Military Reserves
 ☐ Contracted ROTC Cadet

* The sponsor is the military or other individual with qualifying federal service upon whom you are basing your waiver application.

Your relationship to the military sponsor:

- ☐ Self
 ☐ Spouse
 ☐ Parent
☐ U.S. court appointment legal guardian**
 ☐ Other***

** Student must be under the age of 24 unless VA educational benefits are used. *** VA educational benefits must be used.

Military sponsor's name (if not self): _____

Section II - Basis for Waiver Request - Please see Section IV for corresponding documentation requirements.

1. Sponsor is an active-duty servicemember or other member of a qualifying federal service and:

- A. ☐ Sponsor is currently stationed in or assigned to Georgia.
- B. ☐ Sponsor was previously stationed in or assigned to Georgia, was reassigned outside the state, and I have remained continuously enrolled in a Georgia high school, TCSG institution, or USG institution.
- a. Date of reassignment: _____ mm/yyyy
- C. ☐ Sponsor was previously stationed in or assigned to Georgia, was reassigned outside the state, and I have remained in Georgia.
- a. Date of reassignment: _____ mm/yyyy
- D. ☐ Sponsor is currently stationed in a state contiguous to the Georgia border and resides in Georgia.
- a. Duty station location: _____
- b. Sponsor's address: _____
- E. ☐ Sponsor was previously stationed in or assigned to Georgia, was reassigned outside the state in the five years prior to the start of classes, and I am their dependent child.
- a. Date of reassignment: _____ mm/yyyy
- F. ☐ I am the dependent child of the sponsor and I completed at least one year of high school in Georgia.
- a. High school name: _____
- b. City: _____ Attended from: _____ mm/yyyy to _____ mm/yyyy
- G. ☐ I will use transferred VA educational benefits and will physically reside in Georgia.

2. Sponsor is:

- A. ☐ An active member of the Georgia National Guard stationed in or assigned to Georgia.
- B. ☐ An active member of a unit of the U.S. Military Reserves based in Georgia.
- C. ☐ A contracted ROTC cadet attending a USG institution.

3. Sponsor is a separated servicemember and:

- A. ☐ I will enroll within 36 months of the separation date and have demonstrated the intent to become domiciled in Georgia.
- a. Sponsor's date of separation: _____ mm/yyyy Date domicile established: _____ mm/yyyy
- B. ☐ I will use VA educational benefits and will have physically resided in Georgia since: _____
- C. ☐ I do not qualify under A or B above but I am a "covered individual" as described in 38 U.S.C. 3679(c).
- a. Please specify: _____



OUT-OF-STATE TUITION WAIVER FOR *MILITARY & OTHER MEMBERS OF A QUALIFYING FEDERAL SERVICE*

Section III Student Oath and Affirmation

I understand that any material false statement made knowingly and willingly by me on this application, or any documents attached hereto may, in accordance with O.C.G.A. 16-10-71, which provides that upon conviction, a person who knowingly commits the offense of false swearing shall be punished by a fine of not more than \$1,000 or by imprisonment for not less than one nor more than five years, or both, subject me to prosecution in a court of law. Additionally, I further understand that any such false statement may subject me to immediate dismissal from the institution.

Further, I certify that, to the best of my knowledge, the information submitted on this application is true and complete.

Signature: _____

Date: _____