

Non-Resident Waiver Form for Veterans, Spouse, and Dependents

According to Senate Bill 297, section 54.058 of the Texas Education Code has been amended, providing for certain veterans, their spouse, and dependent children (under the age of 25) to be entitled to pay tuition and fees at an institution of higher education at the rates provided for Texas residents regardless of the length of time the person has resided in the state, given that entitled persons file with the institution a letter of intent to establish residency and reside in Texas while enrolled in the institution. This tuition waiver provision is provided for those individuals eligible for benefits under the federal Post-9/11 Veterans Educational Assistance Act of 2008 (38 U.S.C. Section 3301 et seq.) or any other federal law authorizing educational benefits for veterans. Residency reclassification must be processed on or before the university's Census Date (See Academic Calendar for date). This form must be submitted to the Office of Veterans Affairs **prior to the start of the enrollment term but no later than the university's Census Date**. *Short term students must submit the form prior to the start of the regular term but no later than the regular term's Census Date*.

Following the completion of the academic year (fall, spring, and summer terms), the student will be required to submit a Residency Questionnaire form and supporting documentation to determine residency classification for subsequent enrollment terms to the Office of Recruitment and Admissions. Failure to submit a Residency Questionnaire at the conclusion of the student's first academic year may result in a reinstatement of non-resident tuition and fees on future terms.

Instructions:

Veteran-Complete Section A, C, D, & E if you are the student Spouse or Dependent-Complete Section A, B, C, D, & E

Section A. Student's Information

Student Name:		Student "A" #:	Student SSN:	
Applying as: Veteran [] Spouse [] Dependent []		Semester:		
Phone #:	Email:		(Ex: Fall 2016)	
Mailing Address:				

Section B. Veteran's Information

Name of Veteran: _

SSN:

Section C. Education Benefit

Please check the benefit you are eligible for or currently using at TAMUCC*:

[] CH 30 MONTGOMERY GI BILL®

] CH 31 VOCATIONAL REHABILITATION AND EMPLOYMENT

[] CH 33 POST 9/11 GI BILL®

] CH 35 DEPENDENTS' EDUCATIONAL ASSISTANCE

[] CH 1606 MONTGOMERY GI BILL® SELECTED RESERVE

*NOTE: If you are not currently using the benefit but are eligible for one listed above the student is required to submit a current Certificate of Eligibility (COE) award letter from the Department of Veterans Affairs that is less than a year old to date.

Section D. Signature

I certify that the military service information provided above is accurate and that the individuals listed as dependents are eligible for this benefit in accordance with Texas Law.

Signature of Veteran

Please print name

Signature of Student (if spouse or dependent child of eligible Veteran)

Date

Verification of Benefit (TAMUCC OFFICE OF VETERANS AFFAIRS USE ONLY):

Authorized Signature of Veterans Affairs Staff

Print Name

Date

Return to: Texas A&M University-Corpus Christi Office of Veterans Affairs 6300 Ocean Drive, Unit 5775 Corpus Christi, TX 78412-5775 Fax: 361.825.2533 or email to <u>veterans.affairs@tamucc.edu</u>



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Section E. Letter of Intent

LETTER OF INTENT

This Letter of Intent gives testament to my plans to establish residency here in the state and to reside in the state while enrolled at Texas A&M University—Corpus Christi. Failure to complete the Letter of Intent may result in a processing delay of my non-resident tuition waiver request.

In signing this letter of intent, I declare that I intend to establish my permanent domicile here in the state and reside in the state during my time of enrollment at the university. I understand that failure to establish and maintain residence in the state will result in the reinstatement of non-resident fees on my student account. I also understand that in order to establish residency I will need to submit a Residency Questionnaire to the Office of Recruitment and Admissions at the expiration of my Non-Resident Waiver. Failure to do so will result in reinstatement of non-resident tuition rate.

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(Signature)	(Date)
(Printed Name)	
(Student "A" #)	
(Notary Public in and for the State of Texas)	(Date)

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