



## Veterans' Dependent Tuition Waiver Eligibility Information and Instructions

<b>Admission</b>	Student must be admitted to a degree program at an Oregon University System campus.
<b>Criteria</b>	<p>In order to be eligible, students must meet one of two sets of criteria:</p> <p>1) The student must be a child (includes adopted child or stepchild) of a Purple Heart recipient, alive or deceased, who was relieved or discharged from service in the Armed Forces of the United States with either an honorable discharge or a general discharge under honorable conditions and was awarded the Purple Heart in 2001 or thereafter for wounds received in combat, OR</p> <p>2) The child (includes adopted child or stepchild), spouse, or unremarried surviving spouse of a member of the United States Armed Forces who:</p> <p>a) Died while on active duty, or b) Died as a result of a military service-connected disability, or c) Is 100% disabled as the result of a military service-connected disability as certified by the Department of Veterans Affairs or any branch of the Armed Forces of the United States.</p> <p>An eligible child must be 23 years of age or younger at the time the child applies for the waiver.</p>
<b>Degree Choice</b>	A child who is older than 23 years of age is eligible for a waiver for a master's degree program if the child: 1) applied for and received a waiver for a baccalaureate degree when the child was 23 years of age or younger; and 2) applied for a master's program waiver within 12 months of receiving a baccalaureate degree.
<b>Residency</b>	The student must meet Oregon residency requirements as stipulated with OAR 580-010-0030 through 580-010-0045.
<b>Award Amount</b>	<p>The maximum waiver granted under this remission program shall be: 1) The total number of attempted credit hours equal to four years of full-time attendance for a baccalaureate degree, and 2) the total number of attempted credit hours equal to two years of full-time attendance for a master's degree.</p> <p>1) The waiver may not exceed the total number of credit hours the qualified student needs to graduate with a baccalaureate or a master's degree. Transferred credit hours accepted for a degree program may or may not count toward the total credit hours needed for degree completion. 2) The amount of tuition waived may be reduced by the amount of any federal aid scholarships or grants, awards from the Oregon Opportunity Grant program established under ORS 348.205, or any other aid from the eligible post-secondary institution, received by the qualified student. 3) This benefit may not apply to previously completed terms (waiver is not retroactive).</p>
<b>Other Details</b>	The application form is due to the Veterans' Clerk Certifying Official no later than 14 days before the applying term. Exceptions may be made on a case-by-case basis.

Submit completed form to the campus Veterans' Certifying Official	EOU: <a href="#">Dorothy Jones</a>	Inlow Hall, Room 105C	(541) 962-3504
	OIT: <a href="#">Whitney Witherspoon</a> <a href="#">Anne Malinowski</a>	Snell Hall, Lower Level Wilsonville Campus	(541) 885-1355 (503) 821-1251
	OSU: <a href="#">Cathy Walker</a> <a href="#">Angela Williamson</a>	102 Kerr Admin Building	(541) 737-2007 541-737-0593
	PSU: <a href="#">Jake Maybury</a>	104 Neuberger Hall	(503) 725-8380
	SOU: <a href="#">John Westbrook</a>	Stevenson Union, CRC/Veterans Services	(541) 552-6107
	UO: <a href="#">Mary Earp</a>	215 Oregon Hall	(541) 346-3119
	WOU: <a href="#">Twi Tish</a>	345 N. Monmouth Avenue	(503) 838-8185



Oregon University System

OREGON UNIVERSITY SYSTEM (OUS)
VETERANS' DEPENDENT TUITION WAIVER APPLICATION

Complete Sections A, B, and C, then submit signed application to the Veterans Certifying Official at the OUS institution where enrolled for further processing at least 14 days prior to start of applying term.

A. Applicant Information Section:

Applicant's Name (First-Middle-Last): \_\_\_\_\_

Applicant's Date of Birth: \_\_\_\_\_ Home Phone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Applicant's Campus ID# (Preferred): \_\_\_\_\_ OR Applicant's SSN: \_\_\_\_\_

Degree Choice (Check One): Baccalaureate Degree: \_\_\_\_\_ Master's Degree: \_\_\_\_\_

Applicant's Email Address: \_\_\_\_\_ Alternate Email Address: \_\_\_\_\_

Relationship to Veteran: [ ] Spouse [ ] Surviving Spouse [ ] Child [ ] Stepchild [ ] Adopted Child

[ ] I certify that I am a qualified dependent (child 23 years of age or younger, spouse, or un-remarried surviving spouse) of an active duty military service veteran, as defined in Chapter 39, Oregon Laws 2008, who: 1) died while on active duty, or 2) died as a result of a service-connected disability, or 3) is 100% disabled as the result of a military service connected disability as certified by the Department of Veterans' Affairs or any branch of the Armed Forces of the United States.

OR

[ ] I certify that I am a qualified child, stepchild, or adopted child of a Purple Heart recipient, alive or deceased, who was relieved or discharged from service in the Armed Forces of the United States with either an honorable discharge or a general discharge under honorable conditions and was awarded the Purple Heart in 2001 or thereafter for wounds received in combat.

\_\_\_\_\_  
Applicant's Signature Date

B. Veteran Information Section: (Completed by Applicant)

Veteran's Name (First-Middle-Last): \_\_\_\_\_ Veteran's DOB: \_\_\_\_\_

Veteran's SSN: \_\_\_\_\_ Veteran's VA File Number: \_\_\_\_\_

C. Applicant Consent to Release Information Section:

I certify that all information provided on this form is true and correct to the best of my knowledge. I agree to provide proof of eligibility to verify my dependent status at the time of application.\* If I am eligible to receive funding for tuition through this fee remission program, I understand I am responsible for any and all applicable fees required for attending classes at the university where I am enrolled. I also understand that the amount of tuition waived may be reduced by the amount of any federal aid scholarships or grants, awards from the Oregon Opportunity Grant program established under ORS 348.205, or any other aid from the eligible post-secondary institution, received by the qualified student. I hereby give permission for my information to be used for OUS public reporting purposes.

\_\_\_\_\_  
Applicant's Signature Date



Oregon  
University  
System

OREGON UNIVERSITY SYSTEM (OUS)  
VETERANS' DEPENDENT TUITION WAIVER APPLICATION (*continued*)

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**Institution Certification Section - Veterans' Certifying Official:**

*According to University records, I certify the below named veteran's dependent applying for the tuition waiver meets the admission, Oregon residency, age, and degree program restrictions as defined in Chapter 39, Oregon Laws 2008.*

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Applicant's Name

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Veterans' Clerk Certifying Official Signature

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Approval Date

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\* Prospective students may obtain proof of eligibility information by calling: 1-888-442-4551 or by mailing a request to the following:

VA Regional Processing Office  
PO Box 8888  
Muskogee, OK 74402-8888