MILITARY DEPENDENT APPLICATION FOR WAIVER OF NON-RESIDENT TUITION

Student Name _____ Student ID No._____

E-Mail address_____ Semester_____

Indicate Name of Sponsor: _____ Branch of Service _____

Dependent must submit a copy of sponsor's federal income tax forms for the previous year along with this waiver

This waiver is for (Check one) ☐ Spouse ☐ Adult Child ☐ Minor Child (under 19 years old)
DOB _____

I agree that it is my responsibility to notify Southwestern College when my sponsor is transferred to another duty station outside of California, or if they retire as an active member of the armed forces.

I declare under penalty of perjury that the foregoing statements made by me are true and correct. I understand that any misrepresentation will result in my immediate dismissal and nonresident fees will be incurred.

_____ _____
Student Signature Date

COMMANDING OFFICER OR PERSONNEL OFFICER USE ONLY

I certify that _____ is stationed in California, on active duty, at

Duty station _____ Date of Assignment: _____ Expires: _____

Home of record as shown on military records: _____

Does this person expect to be stationed in California on the residency determination date? ☐ YES ☐ NO

Present stay in California began for student: _____.

I certify the above information to be correct according to military records.

MUST BEAR OFFICIAL SEAL OR STAMP

_____ _____
Commanding Officer or Personnel Officer Signature Date

ADMISSIONS & RECORDS OFFICE USE ONLY

Dep.ID Expires _____ _____ Federal Tax Returns ☐ Signed to bring later Federal Tax Ret

☐ Marriage Cert. (If married less than 1 yr.) ☐ ASPR ☐ BILL ☐ PEMS By Date

MILITARY DEPENDENT ID VERIFICATION

SEMESTER/YEAR	ASPR	BILL	PEMS	STAFF	DATE
☐SP ☐SU ☐FA Year					
☐SP ☐SU ☐FA Year					
☐SP ☐SU ☐FA Year					
☐SP ☐SU ☐FA Year					
☐SP ☐SU ☐FA Year					
☐SP ☐SU ☐FA Year					