

Veteran, Service-Member, Dependent, Spouse, Non-Resident Tuition Waiver

Instructions and Form

- **Criteria:** Must be a veteran, service-member or dependent/spouse of a veteran/service-member of any branch of the U.S. Armed Forces. Veteran must have a "Honorable Discharge".
- **Award:** Veteran, service members, dependents, survivors and spouses will receive a waiver that covers 100% of their non-resident tuition.
- **The veteran/service member shall complete and submit the following documentation:**
- **Veteran, Service Member, Dependent Non-Resident Tuition Waiver Request**
 - DD214 or NGB22 or
 - Proof of current service or
 - Other documentation as required
- **Dependents shall complete and submit the following documentation:**
 - Veteran, Service Member, Dependent Non-Resident Tuition Waiver Request
 - Documentation applicable to veteran status verification
 - Dependency verification documentation
- **Return application and all documentation to the Center for America's Veterans, 126 Magruder Street, P. O. Drawer 6283, Mississippi State, MS 39762**



Veteran, Service-Member, Dependent, Spouse Non-Resident Tuition Waiver Request Form

Name of Student: _____ MSU NET ID#: _____

Date of Birth: ____/____/____ Entry Term: _____ 20____

Address: _____

City: _____ State: _____ Zip: _____

Relationship to Veteran/Service Member:

Self Spouse Daughter Son
Adopted Daughter Adopted Son Step Daughter Step Son

Name of Veteran/Service-Member: _____

Branch of Service: _____ Dates of Service: _____

Type of Discharge (if applicable): _____

ONE OF THE FOLLOWING FORMS OF DOCUMENTATION MUST ACCOMPANY APPLICATION

Honorably Discharged or Retiree:

- ____ DD214 (Member 4 Copy)
- ____ NGB22
- ____ Certificate of Discharge
- ____ Dependent Status Verification (if applicable)
- ____ Other documentation (as required)

Active Duty:

- ____ Current Orders/Unit of Assignment
- ____ Copy of Military ID (Dependent)
- ____ Copy of Military ID (Service Member)
- ____ Dependent Status Verification (if applicable)
- ____ Other documentation (as required)

SIGNATURES (Please Print Your Name then Sign)

Student **Date**

Veteran/Service Member **Date**

Center for America's Veterans **Date**