

100% TUITION WAIVER FOR DEPENDENTS OF A DISABLED/DECEASED/MIA/POW VETERAN

This form MUST BE TURNED INTO THE VETERANS RESOURCE CENTER <u>NOT LATER THAN THE 10th BUSINESS DAY OF THE</u> **QUARTER** to be effective for that quarter. **Late submissions will not be accepted.**

You must turn this form in each quarter. It IS NOT automatically renewed.

ELIGIBILITY

You are eligible to receive a waiver of all your tuition if your parent or spouse was an eligible veteran or national guard member who 1) became 100% disabled as designated by the Department of Veterans Affairs; or 2) who lost his or her life while engaged in active federal military or naval service; or 3) who is determined by the federal government to be a prisoner of war or missing in action. Please talk to the Office of Veteran Affairs with questions regarding the waiving of fees (RCW28B.15.621).

The waiver applicant must be domiciled in the State of Washington (RCW 28B.15.013). The child or stepchild must be between the **age of 17 and 26** (marital status does not affect eligibility). The surviving spouse or domestic partner has **10 years** from the date of death, total disability, or federal determination of POW or MIA status to receive benefits under this waiver. Upon remarriage or the establishment of a domestic partnership, the surviving spouse or domestic partner is ineligible. If death results from total disability, the surviving spouse or domestic partner has **10 years** from the date of death in which to receive benefits under this waiver.

Procedures: You must provide proof that the veteran or National Guard member's 100% disability or death was service connected or provide proof of MIA, KIA or POW status (by including the Veterans Rating/Decision Letter). As proof of relation to the veteran: if you are currently receiving VA education benefits attach the Department of Veterans Affairs Certificate of Eligibility. If you are not currently receiving VA education benefits submit a copy of your Birth Certificate (child) or your Marriage Certificate (spouse) or your Birth Certificate and Parent's Marriage License (stepchild) or Adoption Paperwork (adopted child) or your Certificate of State Registered Domestic Partnership (domestic partner).

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Address							
Phone			Email				
I certify t	that I meet tl	ne qualifying c	riteria listed abo	ve.			
Signatur	e				Date		