Veterans, Spouses, Dependents
Non-Resident Tuition Waiver Application

This form is to be submitted by Veterans, Spouses, and Dependents who are not residents for tuition purposes as per Florida Statute 1009.21.

Active duty Service members stationed in Florida and any drilling member of the Florida National Guard, Air National Guard, or Reserve component is classified as a Resident for tuition purposes and does not need to apply for this waiver.

Eligibility Criteria
Florida law authorizes FIU to waive the out-of-state portion of tuition for Veterans of the United States Armed Forces, Guard and Reserve forces, their Spouses and Dependents who demonstrate that they:

- **Veterans/Spouses/Dependents** - Physically reside in the State of Florida (Proof may include but is not limited to Florida Drivers License, Florida Identification card, housing lease in Florida while attending FIU) and
- **Veterans** - Have been honorably discharged from the U.S. Armed Forces (Proof may include but is not limited to your DD-214, member 4 copy, or other documentation deemed appropriate by the Veteran and Military Affairs office)
- **Spouses/Dependents** - must be using the GI Bill for the term you are receiving the out of state tuition waiver. If your entitlement has run out or you are not using the GI Bill you will not be eligible for the out of state tuition waiver. (Proof shall include the students Certificate of Eligibility (COE), AND a request to be certified to the VA for classes during the waived term.)

Continuing Students (Veterans/Spouses/Dependents)
- Continuing students receiving the waiver must recertify their physical presence in Florida each semester, prior to the beginning of the semester. Nothing is automatic, you must resubmit this application each semester to receive the waiver.
- **NOTE:** Students who are eligible to establish residency in Florida as per Florida Statute 1009.21 will not be required to recertify physical presence in Florida each semester once their residency has been changed to Florida.

**Student Information:**
Veteran ________ Spouse ________ Dependent ________

Term Requested [ ] Fall 20________ [ ] Spring 20________ [ ] Summer 20________

Full Name ____________________________ First ____________________________ Middle ____________________________

Student ID Number ____________________________ Date of last Discharge (ETS) ____________ Veteran only

By signing this form, I, ____________________________, certify that I meet the eligibility criteria set forth above. I further understand that the waiver will be applicable for maximum of 110 percent of the required credit hours of the degree or certificate program for which I am enrolled. I also understand it is my responsibility to recertify my physical presence in Florida each semester. **Establishing residency in Florida pursuant to Florida Statute 1009.21 will make it unnecessary to recertify each semester.**

________________________________________
Student’s Signature ____________________________ Date ____________

**Below is for Office Processing purposes only**

Name of staff member processing form: ____________________________ Date ____________

Physical residence confirmed? YES NO 
Honorably discharged Veteran? YES NO

Spouse or Dependent COE YES NO Request to be certified (spouse, dependent) YES NO

Student qualifies for waiver: YES NO DD-214 Received? YES NO

**Effective TERM:** [ ] Fall 20________ [ ] Spring 20________ [ ] Summer 20________