ACTIVE DUTY MILITARY TUITION ADJUSTMENT FORM

Indicate the term for which you are requesting the ACTIVE DUTY Military Adjustment Form:
Term _________ Year _________

Attention: Certification of this form must be signed and submitted to Office of Financial Aid, 30 days prior to the first day of the semester. Failure to submit this form by this date may result in non-resident tuition classification for the semester without right to appeal.

Student’s Name: Last First Middle Former Name
Address Street City State Zip
CSUID Date of birth
CSU Email Daytime Phone Number

Sponsors Name: (if not student) Last First Middle Former Name
Address Street City State Zip
(______) ___________________ Relationship to Student Email
Daytime Phone Number

Military member please check the correct response below. If one of the next 3 statements does not apply to the military member, please do not complete this form.

_____ My dependent child listed above as the student was born to or legally adopted at the time I was stationed in Colorado on PCS orders – provide copy of birth certificate or adoption certificate

_____ My spouse listed above as the student was my legal spouse at the time I was stationed in Colorado and we are currently still legally married – provide copy of marriage certificate

_____ I am the military member requesting the Military tuition adjustment for myself as the student.

Military member please check the correct response below. If one of the next 2 statements does not apply to the military member, please do not complete this form.

_____ Military member is currently stationed in Colorado, complete Part 1 and Part 2 and attach a copy of your current orders stationing you in Colorado along with military and dependent ID’s.

_____ Military member is not currently stationed in Colorado but was stationed in Colorado within 12 years of the first day of the semester and I am requesting this adjustment. Complete Part 2 and attach a copy of your PCS military orders stationing you in Colorado and orders transferring you out of Colorado along with military and dependent ID’s.

Part I - To Be Completed by the Base Education Officer

I certify that (Name) ________________________________ is an active duty member of the U.S Armed Forces and

boxes: ☑️ has a permanent duty station (PCS) or ☑️ is on temporary assignment to duty (TDY) in Colorado at (name of military installation) _____________________________ and that (name of dependent) _______________________ is a legal dependent of this member. I further attest that
the information certified above □ will □ will not remain in effect as of the first day of classes for the semester listed above at Colorado State University.

Certifying Officer: ___________________________ Date __________

Name (Please print) ___________________________ Title (Please print) ___________________________

Office or Command ___________________________

Signature of Certifying Official ___________________________ Date __________

Part II – Student and military member Certification

I understand and agree to the following conditions:
• This form must be completed and submitted to Office of Financial Aid 30 days prior to the first day of classes.
• If my waiver is based on TDY assignment, I am not eligible to receive the College Opportunity Fund (COF) and I am responsible to pay full resident-based tuition and this adjustment will remain in effect only as long as the military member has TDY orders in Colorado.
• If your waiver is based on PCS orders this certification remains in effect as long as the student maintains continuous enrollment, not including summers.
• Attach copies of all required documentation including birth certificates, adoption certificate, marriage certificate, military orders and military IDs. Enlarge copy of military IDs when faxing. (Opinions from JAG Office at Fort Carson and Peterson Air Force Base permit copying of IDs for the legitimate purpose of obtaining a benefit for military personnel and dependents.)

Student Signature ___________________________ Date __________

U.S. Military Member Signature (if not the student) ___________________________ Date __________

Remember:
➢ Attach copies all required documentation including birth certificates, adoption certificate, marriage certificate, military orders and military IDs. (military member and dependent)
➢ Submit only copies of all documentation. Documentation will not be returned.
➢ Return completed form and supporting documents:
  o Scan and send to Office of Financial Aid secure document upload at: financialaid@colostate.edu, select “contact us” and “secure document upload.”
  o Fax to: 970-491-5010, attention Tuition Classification
    ▪ Enlarge and lighten copy of military IDs when faxing.
  o Mail or deliver petition to: Office of Financial Aid
    Division of Enrollment and Access
    Centennial Hall
    Colorado State University
    Campus Delivery 1065
    Fort Collins, Colorado 80523-1065

➢ Petitions received after the deadline date and/or incomplete petitions will not be accepted or reviewed for that term. The result will be tuition assessed as a non-resident for that term. Your tuition classification status remains unchanged until your form is approved and financial decisions should be made accordingly.
➢ Financial aid will be adjusted if you are granted resident-based tuition. You will no longer be eligible for scholarships based on non-resident tuition.
➢ Students can obtain in-state classification if they meet the requirements for Colorado domicile and submit a Petition for In-state Tuition Classification to Office of Financial Aid the semester deadline. Please refer to www.financialaid.colostate.edu/residency.