



## UGA Request for Out-of-State Tuition Differential Waiver for Georgia National Guard and U.S. Military Reservists

The University System of Georgia Board of Regents Policy 704.041 (j) states: an institution may waive out-of-state tuition and assess in-state tuition for: **Georgia National Guard and U.S. Military Reservists**. *Active members of the Georgia National Guard, stationed or assigned to Georgia or active members of a unit of the U.S. Military Reserves based in Georgia, and their spouses and their dependent children (BR Minutes, October 2008).*

### Section One – Student Information

Name \_\_\_\_\_ ID# \_\_\_\_\_ -- \_\_\_\_\_ -- \_\_\_\_\_  
last first middle initial

Georgia Permanent Address \_\_\_\_\_  
street address city state zip

E-mail address \_\_\_\_\_ Telephone # ( \_\_\_\_\_ ) \_\_\_\_\_ -- \_\_\_\_\_  
Please provide best email and telephone number for notification and contact purposes

### Section Two – Effective Beginning Semester (choose one)

*Note: Waiver valid for one semester. Waivers will not be considered for previous terms.*

\_\_\_ Fall (August) \_\_\_ Spring (January) \_\_\_ Summer (choose session): \_\_\_ May \_\_\_ E \_\_\_ Thru \_\_\_ SS1 \_\_\_ SS2

### Section Three – Guard or Reserve Member Information

Name \_\_\_\_\_ Rank \_\_\_\_\_  
last first middle

Military Unit \_\_\_\_\_ Date of Assignment \_\_\_\_\_

*For spouses and dependent children:* I am a \_\_\_ Spouse \_\_\_ Dependent Child of the Guard or Reserve member.

*For military unit's personnel officer:* I certify the above named Guard or Reserve member meets the qualifications for this waiver.

Personnel Officer \_\_\_\_\_ Telephone # ( \_\_\_\_\_ ) \_\_\_\_\_ -- \_\_\_\_\_

Signature of Personnel Office \_\_\_\_\_ Date \_\_\_\_\_

### Section Four – Documentation Required (please attach to this form)

1. Copy of orders assigning individual to a Guard or Reserve unit in Georgia. *Required only once.*
2. *For spouses and dependent children.* Copy of military ID (both sides). *Required only once.*

### Section Five – Student's Oath and Affirmation

I, the undersigned, hereby swear or affirm to the authenticity of the information provided in this affidavit. I understand that any false or misleading information on this affidavit or provided to support this affidavit may result in denial of admission or expulsion from the University. I also authorize the University to review or examine any and all documents and records which may assist in clarifying my qualifications for a waiver of the out-of-state tuition differential.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please return this completed form and required documentation to:  
**Residency and Tuition Classification Center / Office of the Registrar / The University of Georgia**  
**Holmes/Hunter Academic Building / Athens, Georgia 30602-6113; Fax: (706) 583-8162**