# Portland State University Veterans' Dependent Tuition Waiver Eligibility Information and Instructions

	Churdent wouth he admitted to a degree group at Depthered Chate University.				
Admission	Student must be admitted to a degree program at Portland State University.				
Deadline	The Veterans' Dependent Tuition Waiver Application is due to the Veteran Certifying Official no later than 14 days before the term begins. Students previously receiving a similar tuition waiver at another college or university are still required to submit this PSU-specific waiver application.				
Criteria	In order to be eligible, students must meet one of two sets of criteria:				
	1) The student must be a child (includes adopted child or stepchild) of a Purple Hear recipient, alive or deceased, who was relieved or discharged from service in the Arm Forces of the United States with either an honorable discharge or a general discharge honorable conditions and was awarded the Purple Heart in 2001 or thereafter for wo received in combat,				
	OR				
	<ul><li>2) The child (includes adopted child or stepchild), spouse, or unremarried surviving spouse of a member of the United States Armed Forces who:</li><li>a) Died while on active duty, or</li></ul>				
	<ul> <li>b) Died as a result of a military service-connected disability, or</li> <li>c) Is 100% disabled as the result of a military service-connected disability as certified by the Department of Veterans Affairs or any branch of the Armed Forces of the United States.</li> </ul>				
Degree Choice	A child who is older than 23 years of age is eligible for a waiver for a master's degree program if the child: 1) applied for and received a waiver for a baccalaureate degree when the child was 23 years of age or younger; and 2) applied for a master's program waiver within 12 months of receiving a baccalaureate degree.				
Residency	The student must meet Oregon residency requirements as stipulated with OAR 580-010-0030 through 580-010-0045.				
Award Amount	The maximum waiver granted under this remission program shall be: 1) The total number of attempted credit hours equal to four years of full-time attendance for a baccalaureate degree, and 2) the total number of attempted credit hours equal to two years of full-time attendance for a master's degree.				
	<ul> <li>The waiver may not exceed the total number of credit hours the qualified student needs to graduate with a baccalaureate or a master's degree. Transferred credit hours accepted for a degree program may or may not count toward the total credit hours needed for degree completion.</li> <li>The amount of tuition waived may be reduced by the amount of any federal aid scholarships or grants, awards from the Oregon Opportunity Grant program established under ORS 348.205, or any other aid from the eligible post-secondary institution, received by the qualified student.</li> <li>This benefit may not apply to previously completed terms (waiver is not retroactive).</li> <li><u>This waiver applies to tuition only</u>; all other fees related to each term are the financial responsibility of the student.</li> </ul>				
Contact Information	Veterans Certification FMH Lobby 1855 SW Broadway Portland, OR 97201				
	Phone: 503-725-8380 Email: vetcert@pdx.edu				

## PORTLAND STATE UNIVERSITY VETERANS' DEPENDENT TUITION WAIVER APPLICATION

COMPLETE SECTIONS A, B, AND C:						
A. Applicant Information Section:						
Student's Name (First-Middle-Last):						
Student's Date of Birth:	Home Phone #:		Cell Phone #:			
Student's PSU ID#						
Degree Choice (Check One): Baccalaureate Degree: Master's Degree:						
PSU Email Address: Alternate Email Address:						
Relationship to Veteran: □Spouse	□Surviving Spouse	□Child	□Stepchild	□Adopted Child		
□ I certify that I am a qualified dependent (child 23 years of age or younger, spouse, or un- remarried surviving spouse) of an active duty military service veteran, as defined in Chapter 39, Oregon Laws 2008, who: 1) died while on active duty, or 2) died as a result of a service-connected disability, or 3) is 100% disabled as the result of a military service connected disability as certified by the Department of Veterans Affairs or any branch of the Armed Forces of the United States.						
OR						
□ I certify that I am a qualified child, stepchild, or adopted child of a Purple Heart recipient, alive or deceased, who was relieved or discharged from service in the Armed Forces of the United States with either an honorable discharge or a general discharge under honorable conditions and was awarded the Purple Heart in 2001 or thereafter for wounds received in combat.						
Applicant's Signature:			Date:			
B. Veteran Information Section:	(to be filled out by st	udent)				
Veteran's Name (First-Middle-Last): Veteran's DOB:						
Veteran's VA File Number:						
C. Applicant Consent to Release Information Section:						

*I* certify that all information provided on this form is true and correct to the best of my knowledge. *I* agree to provide proof of eligibility to verify my dependent status at the time of application. If I am eligible to receive funding for tuition through this fee remission program, I understand I am responsible for any and all applicable fees required for attending classes at the university where I am enrolled. I also understand that the amount of tuition waived may be reduced by the amount of any federal aid scholarships or grants, awards from the Oregon Opportunity Grant program established under ORS 348.205, or any other aid from the eligible post-secondary institution, received by the qualified student. I hereby give permission for my information to be used for OUS public reporting purposes.

Applicant's Signature: Date:

### PORTLAND STATE UNIVERSITY VETERANS' DEPENDENT TUITION WAIVER APPLICATION

#### THIS SECTION TO BE COMPLETED BY PORTLAND STATE UNIVERSITY'S VETERAN CERTIFYING OFFICIAL

#### **Institution Certification Section - Veteran Certifying Official:**

According to University records, I certify the below named veteran's dependent applying for the tuition waiver meets the admission, Oregon residency, age, and degree program restrictions as defined in Chapter 39, Oregon Laws 2008.

Student Name: \_\_\_\_\_

Student ID Number:

Veteran Certifying Official Signature: \_\_\_\_\_

Approval Date: \_\_\_\_\_

Revised 11/29/22