



SAVANNAH STATE UNIVERSITY

APPLICATION FOR OUT-OF-STATE TUITION DIFFERENTIAL WAIVER FOR MILITARY PERSONNEL AND THEIR DEPENDENTS

Military personnel, their spouses, and their dependent children stationed in or assigned to Georgia and on active duty may apply for this waiver. The waiver can be retained by the military personnel, their spouses, and their dependent children if:

1. The military sponsor is reassigned outside of Georgia, and the student(s) remain(s) continuously enrolled and the military sponsor remains on active military status;
2. The military sponsor is reassigned out-of-state and the spouse and dependent children remain in Georgia and the sponsor remains on active military duty; or,
3. The active military personnel and their spouse and dependent children are stationed in a state contiguous to the Georgia border and live in Georgia.

NOTE: This waiver will be valid for one year only. You will need to provide verification of your military status on an annual basis to remain eligible for the waiver.

Section I – To be completed by the STUDENT

| | |
|---------------|-------------|
| Student name: | Student ID: |
|---------------|-------------|

Address:

| | |
|--------|--------|
| Email: | Phone: |
|--------|--------|

Please select which of the following apply:

| | |
|--|---|
| <input type="checkbox"/> 1. I am an active duty military member <ul style="list-style-type: none"> <input type="checkbox"/> A-Currently stationed in or assigned to GA. <input type="checkbox"/> B-Previously stationed in or assigned to GA but currently reassigned outside of GA. <input type="checkbox"/> C-Currently stationed in or assigned to a state contiguous to the Georgia border and I currently live in GA. | <input type="checkbox"/> 2. I am a dependent of an active duty military member and <ul style="list-style-type: none"> <input type="checkbox"/> A-My military sponsor is currently stationed in or assigned to GA. <input type="checkbox"/> B-My military sponsor was previously stationed in or assigned to GA but has been reassigned outside of GA. <input type="checkbox"/> C-My military sponsor is currently stationed in or assigned to a state contiguous to the GA border and currently lives in Georgia. |
|--|---|

Term applying for waiver: Fall Spring Summer Year: _____

Military Member Information:

Military Member Name: _____

Relationship to Student: _____

Current Duty Station: _____

Dates of Assignment to Georgia: _____

Section II – Documentation Requirements

ALL APPLICANTS (all of the following)

Copy of permanent orders; Enlisted Record Brief (ERB); or, letter from Commanding Officer indicating assignment to duty in Georgia.

Documentation of applicant's lawful presence in the United States, such as:

- A certified U.S. birth certificate
- A current U.S. passport
- A U.S. Certificate of Naturalization or Citizenship
- A current GA driver's license or state-issued ID issued after January 1, 2008
- A current military ID

APPLICANTS APPLYING UNDER 1B or 2B ABOVE

Copy of permanent orders; Enlisted Record Brief (ERB); or, letter from Commanding Officer indicating reassignment outside of Georgia.

APPLICANTS APPLYING UNDER 1C or 2C ABOVE

Copy of permanent orders; Enlisted Record Brief (ERB); or, letter from Commanding Officer indicating assignment to a state contiguous to Georgia and documentation showing residence in Georgia.

STUDENTS WHO ARE THE CHILD OR SPOUSE OF THE MILITARY MEMBER

One of the following to show relationship/dependency of the student to the military member:

- Presentation of Dependent Military ID (must be presented in person)
- DD1172 (DEERS form)
- Latest state or federal tax returns listing student as a dependent
- Marriage certificate (spouse only)
- Birth certificate (child only)
- U.S. court documentation of guardianship

Section III – Oath and Affirmation

I understand that any material false statement made knowingly and willingly by me on this application, or any documents attached hereto may, in accordance with O.C.G.A. 16-10-71, which provides that upon conviction, a person who knowingly commits the offense of false swearing shall be punished by a fine of not more than \$1,000 or by imprisonment for not less than one nor more than five years, or both, subject me to prosecution in a court of law. Additionally, I further understand that any such false statement may subject me to immediate dismissal from the institution.

Further, I certify that, to the best of my knowledge, the information submitted on this application is true and complete.

Student's Signature

Date

Submit completed form and required documentation to:

Email: ssuwaiver@savannahstate.edu

Fax: 912-358-4588

Tuition Classification Officer

Savannah State University

3219 College Street

Box 20209

Savannah, Georgia 31404