Application for SLCC Non Resident Tuition Waiver - Section 702 of the Choice Act of 2014

Print name ___________________________ Signature ___________________________ Date _______________

Student number ___________ Phone number ___________ myPage email _____________________________

*****The first term I requested/will request to use this waiver is Term ________________.
MUST BE COMPLETED/SUBMITTED TO RESIDENCY OFFICE BY THE END OF THE FIRST WEEK OF EACH TERM

Initial _____ We communicate with you through your myPage college email only. It is your responsibility to check the email for our communication.

Initial ___ I elect to use the temporary waiver under Section 702 of 2014 for Term ________.

I qualify under (select 1 option below)
___ Veteran (ch 30/ Ch 33)
___ Dependent-Fry Scholarship (ch 33F) ___ Dependent- Transfer of Benefits (ch 33T)

Initial _____ I understand this form MUST be completed by me every semester to use the waiver
Initial _____ I understand I must attend SLCC every semester for this waiver to remain in effect.
Initial _____ I understand I must qualify for this waiver each semester (see qualifying list on other side).

Documents and processes completed and submitted with this request:

First semester Only- complete steps 1-6 below
1. _____ Complete SLCC Online Residency Application -supporting documentation submitted (first semester only) located on your mypage account towards the bottom of the page.
2. _____ Veterans DD-214 with honorable discharge (first semester only) must provide this to qualify
3. _____ Enrolled within 3 years of Discharge (Veteran/Dependent Transfer of Benefit) or within 3 years of death of servicemember (ch 33F)

Continuing students please complete steps 4-6 each semester:

4. _____ Proof of continuously living in Utah (mail, utility bill, etc)
5. _____ Proof of ch 30/ch 33 eligibility (Certificate of Eligibility from the VA) (each semester)
6. _____ Submit request for Certification for VA Ed benefits to SLCC Veterans Services (VS verify)

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For Residency Office use only
_____ Complete SLCC Online Residency App -supporting documentation submitted and completed request for 702 waiver
_____ Veteran DD-214 showing honorable discharge (first semester only)
_____ Enrolled within 3 years of Discharge (Veteran/Dependent TEB) or within 3 years of death of servicemember (ch 33F)
_____ Proof of ch 30/ch 33 eligibility (Certificate of Eligibility from the VA) (each semester)
_____ Proof of living in Utah (each semester)
_____ Submitted request for Certification of VA benefits to Veterans Services (each semester) verified by Veterans Services

APPROVED _______________________________ DENIED _______________________________ REASON _______________________________

Salt Lake Community College- Veterans Services, STCS PO Box 30808 Salt Lake City, UT 84130 www.slcc.edu/veterans veterans@slcc.edu
Taylorsville Redwood Campus  4600 South Redwood Road- Student Center, 059 (801) 957-4289 office FAX: (801) 957-4987
South City Campus 1575 South State Street, SCC 1-061-H-B/C (801) 957-3010 office FAX: (801) 997-3010

FORM: Request for Section 702 non-resident waiver

revised 12-15-15