



Registrar Services

400 E. University Way
Ellensburg, WA 98926-7465

RESIDENT TUITION FOR NATIONAL GUARD MEMBERS

FOR OFFICE USE ONLY	
Today's Date _____	Effective Date _____
Approved	Denied
_____ Residence Classification Officer	

WASHINGTON GUARD MEMBER

ELIGIBILITY: You are eligible to pay resident tuition and fees if you are a member of the Washington National Guard.

CONDITIONS: You will be classified to receive in-state tuition; however, you will not be eligible to receive financial aid benefits that are only available for students who satisfy the statutory requirements regarding Washington State residency for tuition purposes.

PROCEDURES: Complete the application section and attach a copy of your military orders showing the date of your assignment to Washington State and a copy of your military identification card.

SPOUSE/DEPENDENT CHILD

ELIGIBILITY: You are eligible to pay resident tuition and fees if you are the spouse or dependent child of a non-resident Washington National Guard member.

CONDITIONS: You will be classified to receive in-state tuition; however, you will not be eligible to receive financial aid benefits that are only available for students who satisfy the statutory requirements regarding Washington State residency for tuition purposes.

PROCEDURES: Complete the application section and attach a copy of your sponsor's military orders showing date of assignment to guard service in Washington State, and verification of your dependent status (i.e. copy of your military identification card, marriage or birth certificate, etc.)

APPLICATION SECTION

Direction: Print legibly with ink. Fully complete each section—indicate enrolled campus, classification, quarter and year you are applying for.

Last Name, First Name, Middle Initial _____	
Address _____	Student ID number _____
Date of birth (mm/dd/yy) _____	
Email _____	Phone _____

CAMPUS:	<input type="checkbox"/> Ellensburg	<input type="checkbox"/> Pierce County	CLASSIFICATION:	<input type="checkbox"/> Service Person
	<input type="checkbox"/> Yakima	<input type="checkbox"/> Everett		<input type="checkbox"/> Spouse
	<input type="checkbox"/> Wenatchee	<input type="checkbox"/> Lynnwood		<input type="checkbox"/> Child
		<input type="checkbox"/> Moses Lake		
		<input type="checkbox"/> Des Moines		

QUARTER/YEAR:

*Entering quarter and year. This tuition reduction will apply for the duration of continuous enrollment.

I certify that I meet the criteria listed and I will notify Central Washington University if my status should change.

_____ Signature
_____ Date

RETURN TO: Registrar Services
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