



**Registrar Services**  
 400 E. University Way  
 Ellensburg, WA 98926-7465

## RESIDENT TUITION FOR MILITARY PERSONNEL

FOR OFFICE USE ONLY	
Today's Date _____	Effective Date _____
<b>Approved</b>	<b>Denied</b>
_____	
Residence Classification Officer	

### ACTIVE DUTY PERSONNEL

**ELIGIBILITY:** You are eligible to pay resident tuition and fees if you are currently stationed in Washington State, on active duty, in the Army, Navy, Marine Corps, Air Force, or Coast 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

**DEADLINE:** *Requests for the change in tuition status must be submitted by the 30th day after the first day of the quarter for which this request is made*

### 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 active duty service member stationed in Washington State.

**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 active duty service in Washington State, and verification of your dependent status (marriage or birth certificate, etc.)

**DEADLINE:** *Requests for the change in tuition status must be submitted by the 30th day after the first day of the quarter for which this request is made*

### 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:**  Ellensburg  Yakima  Wenatchee  Moses Lake  Pierce County  Everett  Lynnwood  Des Moines

**CLASSIFICATION:**  Service Person  Spouse  Child

**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  
 400 E. University Way  
 Ellensburg, WA 98926-7465  
 residency@cwu.edu