



Veterans' Dependent Tuition Waiver Eligibility Information and Instructions

Admission	Student must be admitted to a degree program at Mt. Hood Community College.
Criteria	<p>In order to be eligible, students must meet one of two sets of criteria:</p> <p>1) The student must be a child (includes adopted child or stepchild) 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,</p> <p style="text-align: center;">OR</p> <p>2) The child (includes adopted child or stepchild), spouse, or un-remarried surviving spouse of a member of the United States Armed Forces who:</p> <p>a) Died while on active duty, or</p> <p>b) Died as a result of a military service-connected disability, or</p> <p>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.</p> <p>An eligible child must be 23 years of age or younger at the time the child applies for the waiver.</p>
Residency	The student must meet Oregon residency requirements as stipulated with OAR 580-010-0030 through 580-010-0045.
Award Amount	<p>The maximum waiver granted under this remission program shall be the total number of attempted credit hours equal to two years of full-time attendance for an associate's degree.</p> <p>1) The waiver may not exceed the total number of credit hours the qualified student needs to graduate with an associate's degree (90). Transferred credit hours accepted for a degree program may count toward the total credit hours needed for degree completion. 2) 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. 3) This benefit may not apply to previously completed terms (waiver is not retroactive).</p>
Proof of Eligibility	<p>Proof of eligibility must be submitted along with the Veterans' Dependent Tuition Waiver.</p> <p>Prospective students may obtain proof of eligibility information by calling: 1-888-442-4551 or by mailing a request to the following:</p> <p style="text-align: center;">VA Regional Processing Office PO Box 8888 Muskogee, OK 74402-8888</p>
GPA Requirement	Students must maintain a session GPA of 2.00 and complete all attempted classes with a passing grade to receive this waiver. If their GPA falls below 2.00, the student will be denied a waiver until they have paid for and completed another term taking and completing a minimum of 6 credits with a GPA of 2.00 or above.
Other Details	The application form is due to the Veterans' Certifying Official no later than 14 days before the applying term. Exceptions may be made on a case-by-case basis.



Veterans' Dependent Tuition Waiver

A. Applicant Information Section:

Applicant's Name (First-Middle-Last): _____

Applicant's Date of Birth: _____ Home Phone #: _____ Cell Phone #: _____

Applicant's Campus ID# (Preferred): _____ OR Applicant's SSN: _____

Declared Degree: _____

Applicant's 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 (who is 23 years of age or younger) 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: (Completed by Applicant)

Veteran's Name (First-Middle-Last): _____ Veteran's DOB: _____

Veteran's SSN: _____ 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. 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 MHCC public reporting purposes. By signing below, I verify that I have both read and agree to the eligibility information provided on this form.

Applicant's Signature Date