



Center for Academic Services
East Carolina University
210 Whichard Building
Greenville, NC 27858-4353
252-328-6077 office • 252-328-1505 fax

MEMORANDUM

TO: ACTIVE DUTY MILITARY OR DEPENDENT RELATIVE

RE: Military Tuition Waiver Renewal Instructions

Under North Carolina General Statutes Section (G.S.) 116-143.3, certain members of the armed services and their dependent relatives may be eligible to be charged a tuition rate less than the out-of-state rate whether or not they qualify as residents for tuition purposes under G.S.116-143.1. You can find the pertinent laws and implementing regulations at <http://www.ecu.edu/cs-acad/registrar/Residency.cfm>. This benefit is renewable each academic year. Included among the requirements for renewal are the following:

- **The member of the armed services or the dependent relative claiming the benefit through the service member must be continuously enrolled in the degree or other program in which he/she was enrolled at the time of the original application.**
- **The dependent relative must continue dependent status.**
- **Armed service members who have been honorably discharged or their dependents who are claiming the benefit must indicate intent to establish residency in North Carolina within 30 days of the discharge date.**

The Military Tuition Waiver Renewal form must be used to apply for a continuation of the waiver of out-of-state tuition for the 2009-2010 academic year. You may be eligible for a continuation of the military waiver and should submit the enclosed form for consideration before August 24, 2009.

Part I of the form should be completed only by applicants previously approved for the tuition waiver who are members of the armed services. Additionally, if you are the service member and have been honorably discharged, you should complete Part III of the form.

Part II of the form should be completed only by previously approved applicants who are dependents of active duty or recently retired military service members. If you are a dependent of a service member who has been honorably discharged, complete Part II and Part III of the form.

Part III of the form should be completed by all service member applicants who have been honorably discharged since submitting their original application or by dependent applicants of service members who have been honorably discharged.

Submit the completed and signed renewal form to the following address: Center for Academic Services, 210 Whichard, Greenville, NC 27858. ***Any forms received after the first day of class cannot be accepted for that semester. If enrollment is broken, a new application for residency status must be submitted for the next semester in which the applicant is enrolled.***

If you have any questions, please contact Mr. John Trifilo at 252-328-6077 or by e-mail at trifiloj@ecu.edu.



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**Renewal of the Benefit of the In-State Tuition Rate
 (As a Member of the Armed Services or Dependent Relative Thereof)**

Applicant's Name _____	Academic Year _____
*ECU ID No. B _____	
*Completion of the ECU ID number is voluntary. It is requested by the institution solely for administrative convenience and record-keeping accuracy, and to provide a personal identifier for the internal records of this institution.	

Part I: Applicants who are service members (If you are not a member of the armed services and claim the in-state rate as a dependent, skip to Part II.)

1. Are you active duty? yes no
2. Are you retired from active duty service? yes no
3. Are you honorably discharged from active duty service? yes no (If yes to question 3, go to Part III below)

Part II: Applicants who are dependent relatives of active duty or recently retired, or honorably discharged military service members (If you are the dependent relative of a service member who has been honorably discharged, answer Part II and Part III.)

Please have the following statement signed by your active duty or retired service member sponsor.

I intend to claim the above named applicant/student as a dependent for tax purposes for tax year 2009.

Military Sponsor's signature	Date
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Part III: Service member applicants who have been honorably discharged or dependent applicants of service members who have been honorably discharged

Indicate any actions you have made toward establishing residency. Please check all that apply.

- | | | |
|--|------------------------------|-----------------------------|
| Acquired (or renewed) NC driver's license | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| Registered to vote in NC | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| Filed NC state tax return for current year | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| Had state income tax withheld for current tax year | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| Registered or licensed a motor vehicle in NC | <input type="checkbox"/> yes | <input type="checkbox"/> no |

<i>I certify that the information on this form is correct and complete.</i>	
Applicant's Signature _____	Date _____