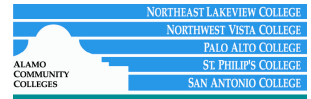




# NORTHWEST VISTA COLLEGE

## MILITARY VERIFICATION FORM



The Texas Education Code Chapter 54.058 (b) provides that military personnel assigned to duty within the state of Texas, their spouse, and their dependent children shall be entitled to pay the same tuition as a resident of Texas. This same provision also applies to commissioned Public Health Officers, their spouses, and their dependents. To be entitled to pay the resident tuition, this Military Duty Statement must be submitted to the Student Success Center and at least once per 12-month academic year. An appropriately authorized officer in the service must certify that the individual is assigned to duty in Texas and that such assigned duty is in effect at the time of enrollment in this public institution of higher education.

*This form must be completed prior to the beginning of the semester of enrollment and **IS REQUIRED EACH YEAR.***

**SECTION I: SPONSOR INFORMATION.** This section must be completed.

Sponsor: \_\_\_\_\_ SSN: \_\_\_\_\_  
(Name of Military Personnel) (SSN of Military Personnel)

Status: Active: \_\_\_\_\_ Reserve: \_\_\_\_\_

Duty Station: \_\_\_\_\_  
(Military Installation)

Home of Record: \_\_\_\_\_

Military I.D. Card No: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Semester of Enrollment (Circle):      Fall      Spring      Summer      Year: \_\_\_\_\_

**SECTION II: DEPENDENT INFORMATION.** \*This section must be completed only if the military dependent is the student.

According to military records, the following individual is the dependent of the above-named military member.

\_\_\_\_\_  
(Name of Dependent) (Social Security Number of Dependent)

Military I.D. Card No: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

**SECTION III: SIGNATURE OF AUTHORIZED PERSONNEL.** \*This form is not valid without the signature below.

**(SIGNATURE OF MILITARY PERSONNEL OFFICER, UNIT COMMANDER, EDUCATION OFFICER OR DESIGNATED REPRESENTATIVE)**

\_\_\_\_\_  
Signature of Authorized Officer Telephone Number

\_\_\_\_\_  
Military Title Grade

**FOR ADMISSIONS AND RECORDS ONLY**

Residency Code \_\_\_\_\_ Verification \_\_\_\_\_ Term \_\_\_\_\_

State \_\_\_\_\_ Verified by \_\_\_\_\_ Date \_\_\_\_\_