MONTANA UNIVERSITY SYSTEM
OFFICE OF COMMISSIONER OF HIGHER EDUCATION
Student Financial Services

560 N. Park – PO Box 203201 – Helena, Montana 59620-3201
(406) 449-9168 - FAX (406) 449-9171 – Mtscholarships@montana.edu

Application for Montana University System – War Orphans Tuition Waiver

QUALIFICATIONS: You may qualify for the War Orphans Tuition Waiver if you meet the following criteria:

- You are a resident of the State of Montana and will be attending a Montana University System campus
- You are 25 years of age or under
- Your parent was a member of the armed forces of the United States who served on active duty during World War II, the Korean, Vietnam, Iraq or Afghanistan conflicts. Such members of the armed forces must have been Montana residents at the time of entry into service and must have been killed in action or died as a result of combat related injury, disease, or other disability while in the service

LIMITATIONS:

- The War Orphans Tuition Waiver **does not waive any fees**. Fees not covered by this waiver are your responsibility
- This waiver cannot be used with other tuition waivers
- This waiver can only be used towards undergraduate tuition
- This tuition waiver will remain in effect as long as you are 25 years of age or under, and you maintain Satisfactory Academic Progress according to the standards detailed in the brochure or guide provided by the Financial Aid Office and/or listed on the website of the college you attend

Student Name: _____
First Middle Last

Social Security Number _____ **Date of Birth:** _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Phone: _____ **Email:** _____

Campus choice: _____ **Semester you plan to begin using this waiver:** _____

Name of Fatally Injured Parent: _____
First Middle Last

Active Duty during which War: _____ **Date of Death:** _____

I certify that the information provided in this application is accurate and complete to the best of my knowledge.

_____ _____
Signature Date

PLEASE SUBMIT THIS FORM, YOUR BIRTH CERTIFICATE, YOUR PARENT'S DEATH CERTIFICATE, PROOF OF PARENT'S ACTIVE DUTY IN A QUALIFYING WAR, PROOF OF YOUR PARENT'S MONTANA RESIDENCY DURING SERVICE, AND ANY ADDITIONAL SUPPORTING DOCUMENTATION TO:
Montana University System, Scholarship Department, P.O. Box 203201, Helena, MT 59620

Once this form is approved/denied, you will receive notification from our office. If approved, you do not need to complete this form again, as long as you remain continuously enrolled at this campus and you continue to meet the requirements listed above.