

For (Term)at (Institut	ion)
*Submit this application to your college or unive	
Each Veteran, child, or spouse applying to receive an exe Code §54.341) must complete and sign this application required to verify eligibility as indicated in this p documentation to your institution's Hazlewood Act Exem	and provide the institution with the documentation acket. Submit this application and all supporting
I am (check only one): [] an applicant applying for the first time; or [_] a previous Hazlewood recipient who has used	benefits (<i>Complete Parts A-E</i>) eased, KIA, or MIA Veteran (<i>Complete Parts A-D</i>) eceased, KIA, or MIA Veteran (<i>Complete Parts A-D</i>)
Part A – Veteran's Information	
Veteran's Student ID# (if applicable):	
Address: Street	City State Zip Code _Email address:
Part B – Other User Information	
Relationship to Veteran: [] Biological Child [] Step-child [] Ado	pted Child [] IRS Dependent [] Spouse
Child's/Spouse's Student ID# : (if applicable) Permanent Address:	
Phone Number:	City State Zip Code
Part C – Loan Verification	
To qualify for the Hazlewood Exemption, the Veteran, ch made or guaranteed by the state of Texas. State loans ca	•
Does the Veteran, child or spouse have a loan through th [] Yes [] No If yes, is the loan in default status? [] Yes [] No [] Not Ap	



Part D – Veteran, Child, and Spouse Certification and Consent

The Texas Hazlewood Act Exemption entitles eligible persons to an exemption of tuition and specified fees of up to 150 semester credit hours at public institutions of higher education in Texas. Except for recipients who are the spouse or children of eligible Veterans killed in action, missing in action, or whose death resulted from a service-related injury or illness; all other Hazlewood recipients meet the grade point average satisfactory academic progress requirements and other requirements of Texas Education Code §54.2001.

I grant permission to any institution I have enrolled in or intend to enroll in to release credit hour information pertaining to my enrollment to the Texas Veterans Commission and the Texas Higher Education Coordinating Board, and further grant permission to the Commission and Board to share such information with any institution that I might attend. I certify that the information I have provided is true and correct to the best of my knowledge. I further understand that if I have provided inaccurate, incomplete, or untrue information on this application, I may be required to reimburse the institution for tuition, fees, and penalties pertaining to the Hazlewood Exemption.

Veteran's Signature:	Date:
(Veteran's signature is not re	quired if the eligible Veteran is totally disabled, service-related deceased, MIA, or KIA.)

Child's/Spouse's Signature:_____

(If applicable.)

Submit this application to your college or university, not to the Texas Veterans Commission

Date:

Part E – Legacy Child Certification and Consent

The Texas Hazlewood Exemption allows eligible Veterans or a designee to transfer all unused hours of the exemption, up to 150 semester credit hours, to a child who is 25 years old or younger on the first day of the term. Legacy recipients will receive an exemption for the number of degree certified hours associated with the specific degree or certificate program he or she is enrolled in consistent with the program length as defined in the school catalog as approved by the regional accreditation commission. Legacy recipients must meet the grade point average satisfactory academic progress requirements and other requirements of Texas Education Code §54.2001. Assigned hours may be revoked by the Veteran or the designee.

 I (Veteran)
 waive the right to all of the unused portion of my Hazlewood

 Exemption and grant permission to transfer those unused Hazlewood hours under Texas Education Code

 §54.341(k) (Legacy Act) to my eligible child, (child)

§54.341(k) (Legacy Act) to my eligible child, (*child*)________. I agree to release current term and historic credit hour information to the Texas Veterans Commission and the Texas Higher Education Coordinating Board to determine the balance of my unused hours. I grant permission for the Commission and Board to share such data with any institution that my eligible child might attend. <u>I understand</u> that only one eligible person may use my hours for a particular term. I hereby certify the information I have provided is true and correct. I understand that if I fail to provide accurate information, I may be required to reimburse the institution and penalties may be imposed.

Veteran's Signature:	_Date:		
* If the qualifying Veteran is deceased, the Veteran's Designee (<i>Print Name</i>)			
may sign above in Veteran's place*			
Veteran's Child's Signature:	Date:		
Submit this application to your college or university, not to the Texas Veterans Commission			

TEXAS VETERANS COMMISSION

ALAMO COLLEGES BUSINESS OFFICE

EXEMPTIONS AND WAIVERS SB1210

ACKNOWLEDGEMENT OF REQUIREMENTS BY TEXAS LEGISLATURE

Date:			

______certify that I am submitting an <u>Exemption/Waiver</u> for (Student Name) (Circle one)

(Semester)

Banner ID is _____

Submitting Exemption/ Waiver:

I understand that:

Ι

I must meet Alamo Colleges Financial Aid cumulative GPA minimum of 2.0 and cannot exceed 30 hours completed beyond degree requirements or 45 hours completed if enrolled prior to 2006 or 120 hours for a student enrolled in a certificate program (in accordance to TEC 54.014 treated as a degree program).

_____I must pay my amount due, if I fail to meet requirements and my cumulative GPA is below 2.0.

_____I will be sent to a collection agency, if my tuition and fees are not paid in full.

______If I fail to meet requirements, I may regain eligibility after completing a term in compliance.

_____If I fail to meet requirements, I may complete and submit the Hardship Exception Form- SB1210 – Exemptions and Waivers to Enrollment Services at home college for VPSS Approval.

Submitting Waiver:

I understand that:

I must meet Alamo Colleges Financial Aid cumulative GPA minimum of 2.0 and cannot exceed 30 hours completed beyond degree requirements or 45 hours completed if enrolled prior to 2006 or 120 hours for a student enrolled in a certificate program (in accordance to TEC 54.014 treated as a degree program).

_____I must pay my amount due, if I fail to meet requirements and my cumulative GPA is below 2.0.

_____I will be sent to a collection agency, if my tuition and fees are not paid in full.

______If I fail to meet requirements, I may regain eligibility after completing a term in compliance.

_____If I fail to meet requirements, I may complete and submit the Hardship Exception Form- SB1210 – Exemptions and Waivers to Enrollment Services at home college for VPSS Approval.

Student Signature	Date
*******	***************************************
Business Office Use Only	
Received by	Waiver/Exemption
*****	*****