Washington State University

Veterans Partial Tuition Waiver Application
-GRADUATE/PROFESSIONAL DEGREE-

**Eligibility:** You are eligible to pay reduced tuition if you are a Washington domiciliary (RCW 28B.15.013) who was an active or reserve member of the United States military or naval forces, or a national guard member called to active duty, who served in active federal service, under either Title 10 or Title 32 of the United States Code, in a war or conflict fought on foreign soil or in international waters or in another location in support of those serving on foreign soil or in international waters, and if discharged from service, has received an honorable discharge. (RCW 28B.15.621)

**Qualifying Criteria:** This waiver is awarded to eligible students pursuing their first graduate/professional degree. The waiver is only applied to the cost of resident tuition. You must be enrolled in minimum of 10 semester credits. Tuition is waived in 10% increments up to 50%, based on GI Bill participation. **You are ineligible for this tuition waiver if you have previously received a veteran’s undergraduate tuition waiver at any institution of higher education in the State of Washington.** You must be domiciled in the state of Washington (RCW 28B.15.013). You must have a character of discharge of “Honorable” in order to qualify for this waiver.

**Procedures:** Please complete the application section below. Attach a copy of your Certificate of Discharge (DD-214 - member copy 4) or other supporting documentation showing qualifying service.

**Information:** Office of the Registrar, Veterans Affairs, PO Box 641035, Pullman, WA 99164-1035, (509)-335-1234, Fax: (509)-335-7823, Email: veterans@wsu.edu.

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**APPLICATION SECTION**

This waiver cannot be used for Summer or Winter Session.
Deadline for submission: no later than the last day of instruction of the semester to which the waiver is to be applied. Waivers submitted after the last day of instruction of the semester will not be granted retroactively, but will be applied to future semesters

_______ Pullman/Spokane ________ Online ________ Tri-Cities ________ Vancouver

For what semester/year are you applying?

Name: ____________________________________________  WSU Student ID: _______________________

Address: __________________________________________

Phone: ___________________________  Email: ____________________________________________

I certify that I meet the eligibility requirements and qualifying criteria listed above.

Signature: ___________________________  Date: ___________________________

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**FOR OFFICE USE ONLY**

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<tr>
<th>DD 214 member copy 4 or other supporting documents</th>
<th>Minimum Credits (10)</th>
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<tr>
<td>1st Graduate or Professional Degree</td>
<td>Domicile</td>
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