myUTSA ID: _____ Student's First Name: _____ Last: _____

UTSA Registrar

Military Duty Statement

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 resident tuition, this Military Duty Statement must be submitted to the Office of the Registrar 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.

For more information, refer to the Texas higher education website statute 21.735 section 10 Programs for Military and their families.

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

Directions: Complete **only** Section A of this form if you are assigned to duty in Texas as a member of: the Armed Forces of the United States; a reserve force; or the Army or Air National Guard. Commissioned Public Health Service Officers also complete Section A. Obtain the signature of your commanding officer or appropriately authorized officer to certify your duty in Texas and the date(s) in effect.

Complete **both** Sections A and B of this form if your spouse or parent is the military personnel entitled to pay the same tuition as a resident of Texas.

Military personnel that are recently married and would like to qualify for the military waiver, please provide a copy of your marriage certificate prior to census date for the semester you plan to attend at UTSA

How to Submit Form: Submit completed form online through the Document Uploader or mail to: The University of Texas at San Antonio, Office of Undergraduate Admissions, One UTSA Circle, San Antonio, Texas 78249.

- **Fields to select on the Document Uploader: Department:** *Registrar;* **Term:** *Select Applicable Term;* **Category:** *Residency;* **Document:** *Military Duty Statement*

SECTION A: MILITARY PERSONNEL

First Name: _____ Middle: _____ Last: _____ SSN*: _____

* Disclosure of your social security number (SSN) is requested from you to help the military locate your official records in order to complete this certification. No statute or other authority requires that you disclose this SSN for that purpose. Failure to provide your SSN, however, may result in delays in obtaining your certification. Further disclosure of your SSN is governed by the Public Information Act (Chapter 52 of the Texas Government Code) and other applicable laws.

This is to certify that the above-mentioned individual is currently assigned to duty at the following installation:

_____

and that this individual will be assigned to duty in Texas by census date (12th class day for Fall or Spring; 4th class day for Summer Terms) for the term:

◯ Fall ◯ Spring ◯ Summer Year: _____ Classification Status: ◯ Undergraduate ◯ Graduate

SECTION B: STUDENT INFORMATION

Further, according to military records, the above-named individual is the (choose one) ◯ *Parent* ◯ *Spouse of:*

First Name: _____ Middle: _____ Last: _____ myUTSA ID: _____

Mailing Address: _____ Apt #: _____

City: _____ State: _____ Zip: _____

The above-named student has applied for admission to The University of Texas at San Antonio for the: ◯ Fall ◯ Spring ◯ Summer Year: _____

UTSA OFFICE USE ONLY:

Date: _____ Received By: _____ Processed By: _____

myUTSA ID: _____ Student's First Name: _____ Last: _____

CERTIFICATION

_____ / _____

Signature of Commanding Officer or other authorized officer *Date*

_____ / _____

Print Name *Phone Number*

_____

Title of authorized officer whose signature appears above

_____

Military Installation in the State of Texas

UTSA OFFICE USE ONLY:

Date: _____ Received By: _____ Processed By: _____