



Application Fee Waiver Request

The application fee waiver request form should be completed by the following students:

I. New Military Students Stationed Overseas

Students who have newly arrived at their overseas duty location and are taking their first postsecondary course using military tuition assistance, but do not wish to apply as a degree-seeking UMUC student at this time.

II. Consortium Students

Students who are currently degree-seeking with one of the following institutions: Central Texas College, Community College of the Air Force, Embry-Riddle Aeronautical University, University of Oklahoma (Europe only), University of Phoenix (Asia only), or with another Servicemembers Opportunity College

Name (last, first, middle) _____

Student ID/EmplID _____

Education Center _____

Name of primary institution, if not UMUC _____

Name of certificate / degree program _____

I. New Military Students Stationed Overseas

I certify that I am a new student that has been recently stationed overseas and will be using military tuition assistance to fund my courses. I am requesting a waiver of the UMUC application fee. If I become degree-seeking with UMUC, I understand I will be charged this fee.

Student's Signature Date

I, the ESO, counselor, or representative of the student's primary institution, certify that the above information given by the student is correct.

Signature (ESO, counselor, or representative of primary institution) Date

II. Consortium Students

I certify that I will enroll only in courses required in my present certificate or degree program and that these courses are not available with my primary institution. Also, should I enroll in a UMUC course not required for my certificate or degree, or if I decide to pursue a certificate or degree with UMUC, I acknowledge that I will be required to pay an application fee.

Student's Signature Date

I, the ESO, counselor, or representative of the student's primary institution, certify that the above information given by the student is correct.

Signature (ESO, counselor, or representative of primary institution) Date