

This 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 UMGC student at this time.

## II. Visiting Non-Degree Seeking Students

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

Student Name: \_\_\_\_\_

MyUMGC Student/Empl ID: \_\_\_\_\_

Education Center: \_\_\_\_\_

Name of primary institution, if not UMGC: \_\_\_\_\_

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 UMGC application fee. If I become degree-seeking with UMGC, 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. Visiting Non-Degree Seeking 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 UMGC course not required for my certificate or degree, or if I decide to pursue a certificate or degree with UMGC, 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