

KANSAS BOARD OF REGENTS

APPLICATION FOR KANSAS RESIDENT FEE PRIVILEGE FOR FORMER KANSAS MILITARY PERSONNEL

(K.S.A. 76-729 (c) (1))

1. This application is for (Check ONE ONLY)

Fall Semester, 20____ Spring semester, 20____ Summer session, 20____

UNLESS OTHERWISE STATED, A NEW APPLICATION MUST BE FILED EACH SEMESTER.

2. _____
Student's Last Name, First, MI Student Number Student's Social Security #

3. Current address _____
Street and Number or Rural Route (P.O. Box not sufficient) Home Phone

_____ City State Zip Work Phone

4. SPOUSE OR DEPENDENT CHILD:

Relationship of Student to Military Person _____

Military Person's Last Name, First, MI _____

Military Person's Signature _____ Social Security # _____

5. DUTY STATION VERIFICATION:

I, _____, verify that _____
(Name of Commanding Officer) (Name of Military Person)

is stationed at _____, on full-time active duty.
(Base Name)

_____ was formerly stationed at _____ a Kansas duty station, from _____ to _____.
(Base Name)

Commanding Officer's (or designee) signature and rank: _____

Date _____ Unit _____ Unit telephone # _____

I certify that the information given on this application is accurate and complete. If any circumstances change affecting the tuition classification status requested by this application, I agree to notify the Office of the University Registrar in writing within 15 days after such change. ***I understand that falsified information can result in financial obligation (non-resident fees) to, and dismissal from, the University and that making a false writing is a felony under Kansas Law (K.S.A. 21-3711).*** I also understand that information from my application for admission and other university records will be considered as part of this application.

Date _____ Student Signature _____
(IN THE PRESENCE OF A NOTARY PUBLIC)

NOTARIZATION:

Subscribed and sworn to/affirmed before me this _____ day of _____, 20____, at _____
CITY

SIGNATURE OF NOTARY _____ MY APPOINTMENT EXPIRES: _____

**RETURN TO: OFFICE OF THE UNIVERSITY REGISTRAR
UNIVERSITY OF KANSAS
1450 JAYHAWK BLVD, ROOM 151 STRONG HALL
LAWRENCE, KANSAS 66045-7535**

**DEADLINE: 30 DAYS AFTER THE FIRST
DAY OF CLASSES FOR THE
SEMESTER YOU ARE
APPLYING**