

Texas Fire Fighter Application for Tuition and Course Fee Exemption

Semester (circle one) Fall Spring Sum. 3 Wk. Sum. 8 Wk. Sum 10 Wk. Sum 12 Wk.
 Sum 5 Wk 1 Sum 5 Wk 2 Year: _____

Name: _____
 Last First MI

Student ID (EMPL #) _____ Student Phone Number _____

City of _____ Fire Department

Important Note: To insure the exemption is paying correctly, the Sponsored Billing Area of Student Financial Services must be contacted if a student makes any changes to their schedule. This includes adding, dropping, swapping, or withdrawing from classes.

Qualifying Criteria and Guidelines:

1. Must submit verification of current employment that includes the employee's position and title on Fire Department letterhead that is signed by a city official.
2. Must be an employed firefighter, not an unpaid volunteer.
3. Must be a permanent, full time fire department employee who is not a secretary, stenographer, clerk, budget analyst, or similar support staff person or other administrative employee.
4. Must be a Texas resident.
5. The application and required proof of employment must be submitted each term (Fall or Spring) or session (Summer) the student is seeking the exemption.

I hereby make application for exemption from the payment of tuition and lab fees as provided by the Texas Education Vernon Code 54.208. In connection with this application, I hereby certify that the information submitted is true and bonafide. If I am determined to be ineligible for this exemption, I understand that this exemption will be removed from my account and I will be responsible for any amount due. I authorize the University to assign any unpaid amount of tuition and fees or financial aid funds to a collection or credit reporting agency or agencies for the purpose of collecting the amount at the option of the University. I promise to pay all attorney's fees and other collection costs and charges necessary for the collection of any amount not paid when due.

 Date

 Signature