

**BRISTOL COMMUNITY COLLEGE
FALL RIVER, MASSACHUSETTS**

**THE COMMONWEALTH OF MASSACHUSETTS
CERTIFICATE OF TUITION/COURSE FEE WAIVER**

STUDENT INFORMATION

(Name)	(Student ID)	
(Street)		
(City)	(State)	(Zip)

CATEGORICAL WAIVER CATEGORY

VETERAN (WARTIME) _____ (Active Duty Dates)	NATIVE AMERICAN _____
SENIOR CITIZEN _____ (Age)	MEMBER OF ARMED FORCES _____ (Command attached)
MASS REHAB COMMISSION _____	MASS COMMISSION OF THE BLIND _____

ELIGIBILITY CERTIFICATION

I certify that I am a United States citizen or eligible non-citizen, I am domiciled in Massachusetts and have maintained a residence herein continuously since _____. I will notify the college should I move from the state. I am not in default of any federal student loans or owe a refund for any previously received financial aid. Further, that I will provide the college with the required documentation to substantiate eligibility for the above referenced categorical waiver. I certify that I am in compliance with applicable Selective Service Registration laws. If eligibility is not substantiated, I agree to accept full responsibility for payment of all charges outstanding.

(student's signature) (date)

*I certify that the above named student has provided the required documentation to evidence eligibility for the above referenced categorical waiver. Enroll in at least three undergraduate credits per semester in state supported undergraduate degree or certificate program. Maintain satisfactory academic progress in accordance with federal and institutional standards. Therefore, in accordance with general laws Chapter 15A, Section 19, a waiver will be granted for the following period:

(Fall Semester)	(Spring Semester)	(Other Enrollment Period)
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(Signature of Appropriate College Official) (Date)

IMPORTANT

NEW POLICY

THIS FORM NEEDS TO BE FILLED OUT, AND RETURNED TO THE STUDENT ACCOUNTS OFFICE FOR ELIGIBILITY OF WAIVER BY THE DUE DATE OF THE TUITION BILL.

No exceptions will be made to this requirement.

1. **VETERAN (WARTIME):**

Normal definition of a “Veteran” for the purpose of tuition waiver is:

- (1) Last discharge is at least under honorable conditions
- (2) Served in the Army, Navy, Marine Corps, Coast Guard or Air Force a total of ninety days, one day of which was wartime service ** exception noted below
- (3) Less than ninety days will qualify if there was a service connected disability or received a purple heart or died

Wartime Dates

Spanish War	2/15/1898 and 7/4/1902	(between dates)
World War I	4/6/1917 and 11/11/1918 or awarded WWI Victory Medal or 3/25/1917 and 8/15/1917 as a Mass. National Guards man	(between dates) (between dates)
World War II	9/16/1940 and 12/31/1946	(between dates)
Korean/ Korean Emergency	6/25/1950 – 1/31/1955	(dates inclusive)
Vietnam	8/5/1964 – 5/7/1975 or 2/1/1955 – 8/4/1964	(dates inclusive) (dates inclusive) and have served at least 180 days with at least one day in the period
Lebanese	** 8/25/1982 – (no ending date yet) special condition – received Campaign Medal	
Grenada	** 10/25/1983 – 12/15/1983 special condition – received Campaign Medal	(dates inclusive)
Persian Gulf	8/2/1990 – (no ending date yet)	

DOCUMENTATION REQUIRED: DD 214 with character of discharge or a Form 10 will document

2. **NATIVE AMERICAN:** as certified by the Bureau of Indian Affairs
3. **SENIOR CITIZEN:** person over the age of 60
4. **ARMED FORCES:** active duty member, stationed and residing in Massachusetts – a letter signed by the commanding officer certifying station and residence is required documentation
5. **MASS REHAB COMMISSION** as certified by Mass Rehab Commission
6. **MASS COMM. OF THE BLIND** as certified by Mass Commission of the Blind

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STUDENT INFORMATION

(Name) ----- (Student ID)

(Street)

(City) ----- (State) ----- (Zip)

CATEGORICAL WAIVER CATEGORY

VETERAN (WARTIME) _____ Non-Credit* NATIVE AMERICAN _____ Non-Credit*
(Active Duty Dates)

SENIOR CITIZEN _____ Non-Credit* MEMBER OF ARMED FORCES _____ Non-Credit*
(Age) (Command attached)

MASS REHAB COMMISSION _____ MASS COMMISSION OF THE BLIND _____

***not applicable**

ELIGIBILITY CERTIFICATION

I certify that I am a United States citizen or eligible non-citizen, I am domiciled in Massachusetts and have maintained a residence herein continuously since _____. I will notify the college should I move from the state. I am not in default of any federal student loans or owe a refund for any previously received financial aid. Further, that I will provide the college with the required documentation to substantiate eligibility for the above referenced categorical waiver. I certify that I am in compliance with applicable Selective Service Registration laws. If eligibility is not substantiated, I agree to accept full responsibility for payment of all charges outstanding.

(student signature) ----- (date)

*I certify that the above named student has provided the required documentation to evidence eligibility for the above referenced categorical waiver. Enroll in at least three undergraduate credits per semester in state supported undergraduate degree or certificate program. Maintain satisfactory academic progress in accordance with federal and institutional standards. Therefore, in accordance with general laws Chapter 15A, Section 19, a waiver will be granted for the following period:

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(Signature of Appropriate College Official) ----- (Date)