CARLSBAD RESIDENT TUITION APPLICATION FOR ACTIVE MILITARY, VETERANS AND DEPENDENTS OF THE US ARMED FORCES

This application is being submitted for waiver of NM resident/non-re		(2)	(•
		(Semester)	((Year)
	Student ID Num	ber		
(Student's full name)				
CERTIFICATION OF ELIGIBII	LITY (Please sele	ct one)		
<u>US Veteran Waiver</u> : On the basis of New Mexico House Bill 427 Forces of the United States (Army, Navy, Air Force, Marine Cor Education benefits under Federal law. (VETN/RESD)				
Veteran/Military Dependent Waiver (VA benefit eligible): On the that I am a dependent/spouse of a veteran of the Armed Forces Corps or Coast Guard) and that I am eligible for Veterans' Education	of the United State	es (Army, Nav	vy, Air Fo	orce, Marine
Active Duty Military Waiver: On the basis of New Mexico Houmember of the Armed Forces of the United States (Army, Navy presently stationed within the exterior boundaries of the State of the Veterans' Education benefits or Department of Defense Tuits (MILITERED)	r, Air Force, Marin f New Mexico, inc	e Corps or Co cluding Ft. Blis	oast Guar ss, or that	rd) who is t I am eligible
(MILH/RESD)				
Active Duty Dependent/Spouse Military Waiver: On the basis of am a dependent/spouse of a military service member of the Arm Force, Marine Corps or Coast Guard) who is presently stationed Mexico, including Ft. Bliss, or that I am eligible for Veterans' Ed Assistance benefits under Federal law. (MILD/RESD)	ned Forces of the I within the exterio	United States or boundaries	(Army, N of the Sta	Navy, Air nte of New
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