

KENNESAW STATE UNIVERSITY
APPLICATION FOR OUT OF STATE TUITION DIFFERENTIAL WAIVER
FULL-TIME EMPLOYEES IN THE UNIVERSITY SYSTEM OF GEORGIA and
GEORGIA PUBLIC SCHOOL SYSTEM

As of the first day of classes for the term, a Full-Time School Employee waiver may be granted to Full-Time employees in the public schools of Georgia, the University System or Technical College System of Georgia, **their spouses, and their dependent children**. Teachers employed full-time on military bases in Georgia shall also qualify for this waiver (Board of Regents Minutes, 1988-89, p.43). This waiver will expire 12 months from the date the waiver was granted. An affected student must petition for residency status after 12 months and must then provide additional documentation according to established procedures at Kennesaw State University. The Petition for Georgia Residence Classification for tuition purposes is available at the Registrar's website or at ww.kennesaw.edu/financialservices/forms/residencypetitionform.pdf.

Please complete the following section for Student Information:

Full Name _____ KSU ID# _____

Present Address _____ KSU email _____
Street City State Zip

Employer _____ How long? _____

Term Applying for: _____ 201_____

Parent/Guardian or Spouse Information (if student is dependent of or spouse of the Full-Time Employee):

Full Name _____

Employer _____ How long? _____

PLEASE ATTACH COPIES OF THE FOLLOWING:

- A complete copy of your **current AND/OR last** contract to teach in a public school system in Georgia **OR** a letter from the Personnel Office of the school system verifying that you are a full-time employee.
- One of the following (depending on situation): a) birth certificate b) U.S. court documentation of guardianship c) marriage certificate.
- Copy of GA driver's license, or U.S. birth certificate or U.S. passport, or Permanent Resident card (front & back) for **student and employee**.
- If applicable**, copy of visa/ immigration documentation (including current EAC - front & back) for **student and employee**.
- If student is a dependent of a full-time employee, please also include a copy of the latest Federal tax return filed showing student as a dependent.

I understand that any material false statement made knowingly and willingly by me on this application, or any documents attached hereto may, in accordance with O.C.G.A. 16-10-71, which provides that upon conviction, a person who knowingly commits the offense of false swearing shall be punished by a fine of not more than \$1,000 or by imprisonment for not less than one nor more than five years, or both, subject me to prosecution in a court of law. Additionally, I further understand that any such false statement may subject me to immediate dismissal from the institution.

I understand that this waiver is valid for 12 months at which time I must renew my waiver or petition to change my tuition classification.

Signature of Student

Date

Signature of Parent/Guardian/Spouse

Date

Submit completed form and required documentation by Mail, Hand Delivery, or Fax to

(Please do not email form and/or required documentation, as required information includes personal identification information):

Kennesaw State University
Attn: Tuition Classification Officer
3391 Town Point Drive Suite #3700, MD #9110
Kennesaw, GA 30144

For Questions, please contact the Tuition Classification Officer at:

Office: 470-578-3251
Fax: 470-578-9187

tuitionclassification@kennesaw.edu

Last Updated 06/09/2016

For KSU use: () supporting docs reviewed () BANNER () confirmation sent to requestor () Database () Spreadsheet