

# Tuition Waiver for Dependents of Disabled & Fallen Service Veterans 2026/27



**DEADLINE: 2<sup>nd</sup> Monday of term (add/drop deadline)**

In recognition of the service and sacrifice of military personnel and their qualifying dependents, the college will allow dependents the opportunity to earn their first associates degree. Dependents include the spouse and children (biological, adoptive, and stepchildren). The waiver covers tuition only, after other free financial aid is applied (e.g. grants and scholarships). The waiver does not cover fees, books, or other expenses, and cannot be used toward community education classes or distance learning programs for recipients from the RCC district. For more information, you may visit the [Oregon Public Law website \(https://oregon.public.law/statutes/ors\\_350.285\)](https://oregon.public.law/statutes/ors_350.285):

### To be eligible, the following must apply:

- The student must have proof of Chapter 35 eligibility
- The student must be an Oregon resident
- The student must be admitted to an RCC certificate or degree program
- The student has not exceeded 135 college credits or completed an Associate degree program
- The student must meet Satisfactory Academic Progress (SAP) minimums of 2.0 cGPA & 66.67% cPace
- The student must complete the FAFSA and complete their financial aid file to determine aid eligibility

Name: \_\_\_\_\_ RCC ID: \_\_\_\_\_

Address: \_\_\_\_\_  
Street, City, State, Zip Code

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Term Requested:  Summer  Fall  Winter  Spring

Dependent Type:  Spouse  Child (under age 24)

### Student Certification:

*By signing this form:*

- *I am authorizing that I meet the eligibility criteria listed above for the Tuition Waiver for Dependents of Disabled and Fallen Service Veterans and have verified my eligibility.*
- *If approved, I understand that the waiver covers tuition only, and I am responsible for all other expenses.*
- *If my eligibility changes or if I switch chapter benefits, I will notify the Military Advisor immediately.*

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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### OFFICE USE ONLY

**Military Advising:**  Approved  Denied **Initials:** \_\_\_\_\_

- Cert attached
- Oregon residency
- Eligible major
- SAP Good Standing

**Financial Aid:**  Approved  Denied **Initials:** \_\_\_\_\_

- FAFSA received
- Award eligibility

Waiver Amount: \$ \_\_\_\_\_