



FIREFIGHTER'S APPLICATION FOR STATE TUITION EXEMPTION

STUDENT NAME: _____ SSN or TVIN: _____

SEMESTER (& year): FALL ____ SPR ____ SU I ____ SU II ____ OTHER _____

BY SIGNING BELOW, I ATTEST TO EACH OF THE FOLLOWING:

I am eligible for the exemption and my supervisor/fire chief has completed the "CERTIFICATION OF EMPLOYMENT OR ELIGIBLE VOLUNTEER" section of this form.

1. The course(s) which I am asking to be covered this semester under the State Firefighter's Tuition Waiver are required for the Fire Protection Technology Degree at Trinity Valley Community College.
2. The course(s) which I am asking to be covered this semester will be used as elective(s). I have _____ hours general electives and _____ hours fire science electives available. (This includes all college credit I have received at other institutions.)
3. It is my intent (whether at this institution or in a planned transfer program) to complete the requirements for an associate degree in fire science. (A copy of my TVCC fire science degree plan accompanies this application.)
4. I fully understand these conditions and realize that any later evidence which proves contrary to this application could result in a disallowance of the waiver and obligate me for the full payment of my expenses waived this semester.

Signature of Firefighter

Name of Supervisor

(Phone Number)

Name of Fire Department

Street Address of Fire Department

City, State, and Zip Code

CERTIFICATION OF EMPLOYMENT OR ELIGIBLE VOLUNTEER

- Mark if : student requesting exemption is employed as a paid fire fighter by a political subdivision of the State of Texas
- Mark if: student requesting exemption is active members of a volunteer fire department who holds an accredited advanced certification (or the equivalent), under the State Firemen's and Fire Marshal's Association of Texas volunteer certification program, OR a Phase V (Firefighter II) certification (or the equivalent) under the Texas Commission of Fire Protection's voluntary certification program under Section 419.071, Govt Code.

NAME & TITLE
(PLEASE PRINT)

SIGNATURE

DATE