



Texas Higher Education Coordinating Board

(800) 242-3062

www.collegeforalltexans.com

Hazlewood Exemption Application Packet for Eligible Children and Spouse of Texas Veterans (HE-D)

The HE-D application is for eligible children and spouses of veterans who wish to apply for the Hazlewood Exemption or for children to whom hours have been transferred through the Legacy Program.

* Contact your institution to find out where and when you should submit the application and supporting documentation. The institution will process your application accordingly. Do **NOT** mail the application to the Texas Higher Education Coordinating Board.

Hazlewood Exemption Application Packet for Eligible Children and Spouse of Texas Veterans

Eligibility Requirements and Documentation

In order to qualify for a tuition and partial fee exemption through the Texas Education Code 54.203 (known as the Hazlewood Act), the child or spouse of certain deceased or disabled Texas member of the Armed Forces or Texas National Guard must meet all program requirements.

The following is a list of program requirements and how they are documented.

Eligibility Requirements	Questions	Documentation
Dependent child or spouse is a resident of Texas at the time he/she uses the exemption.	N/A	Institution's classification as a resident by the registrar or admissions office.
Dependent child or spouse is not in default on a loan made or guaranteed by the state of Texas; includes College Access Loan (CAL), Health Education Loan (HELP), state's Stafford Loan and Texas B-On-Time Loan Program (BOT). Federal loans are not included.	Question 5	Children or spouse of veterans having with loans made through the Texas Higher Education Coordinating Board must log into www.HHLoans.com and print the page showing their loan status to provide to the institution. Applicants without a loan with THECB will be verified by the institution and the CB.
If eligible for federal veteran's education benefits under Ch. 33 Post 911 GI Bill, the value of these benefits cannot exceed the value of the Hazlewood exemption.	Question 6	Benefit letter from VA Education Center in Muskogee, Oklahoma, 1-888-GI-Bill-1 or 1-888-442-4551 or www.gibill.va.gov .
Veteran died or is rated totally disabled for purposes of employability as a result of illness/injury related to service.	Question 11	DD1300 issued by the Department of Defense (if parent died while still in the service); letter from VA if parent died after discharge. Ratings Disability letter from VA if parent is rated as unemployable.
If a child , proof that he or she was a dependent on or before the date the veteran parent died or sustained the disabling injury or was declared by VA as unemployable because of the injury.	Question 12	Copy of a birth certificate or tax return indicating dependency at the time the parent died or became disabled. Note: Effective Fall 2011, all children applying for the exemption for the first time must be 25 or younger.
If a spouse , proof that he or she is the disabled veteran's spouse.	Question 13	Copy of the legal marriage certificate or tax return indicating the marriage status with the veteran.
Veteran parent or spouse (at the time of service entry): 1. entered the service in Texas, 2. declared Texas as his or her home of record, <u>or</u> 3. was a resident of Texas	Questions 14 and 15	DD214 shows "place of entry" and "home of record at time of entry" boxes. The Hazlewood administrator will review this document. If the DD214 shows HOR and Place of Entry were not Texas, applicant must complete the Hazlewood Residency Questionnaire and submit with the Application. A copy of the Questionnaire is included in this packet.

Documents to Submit

To apply for a Hazlewood Exemption, you must submit the following documents to your institution:

1. **The Hazlewood Exemption Application for Eligible Dependents of Texas Veterans Who have Never Used the Exemption**
(HE-D) – This application
(HE-V) – Application for Veterans
2. **If your parent or spouse died while in service,**
DD1300 – for use in verifying your parent's place of entry, and that his/her death was service-related.
3. **If your parent or spouse died after discharge as a result of service-related illness or injury,**
DD214 – to verify parent's place of entry
Letter from VA – to confirm death was related to service
4. **If your parent or spouse became unemployable due to military service-related illness or injury,**
Ratings Decision Letter – to confirm the parent or spouse is considered to be totally disabled with respect to employability.
5. **Benefits letter from Muskogee, Oklahoma**– to verify the value of your CH 33 federal veteran's education benefits. Obtain a benefits letter from VA Education Center in Muskogee, Oklahoma. 1-888-GI-Bill-1 or 1-888-442-4551 or www.gibill.va.gov
6. **Hazlewood Residency Questionnaire for Dependent Children and Spouse of Veterans** –ONLY if your answers to both 14a and to 14b on the application were "no".
7. **If the veteran or any dependent of the veteran has used the Hazlewood Exemption, a printout of hours used.** – login at the Hazlewood Exemption page located at www.collegeforalltexas.com

The easiest way to acquire a copy of the DD214 or DD1300 is to contact the VA regional office in Waco or Houston, whose addresses are:

Houston Regional Office
6900 Almeda Road
Houston, TX 77030-4200
1-800-827-1000
713-383-5340

Waco Regional Office
One Veteran Plaza
701 Clay Avenue
Waco, TX 76799
1-800-827-1000
254-299-9774

To receive a copy of the Ratings Decision Letter, contact the Waco Regional Office.

Part C . Spouse or Child who has Previously Received Exemption

If applying as the child or spouse of a service member:

Name of service-member parent/spouse: _____ SSN: _____

9. Last term in which you used the Hazlewood exemption: _____ / _____
(fall, spring or summer) / year

10. Name (not initials) of all the schools where you have used it: _____

Part D . Spouse or child applying for exemption for 1st time.

11. Deceased or disabled Parent or Spouse: Name: _____

SSN: _____

12. If you are a veteran's child, is the veteran's name on your birth certificate or were you claimed as a dependent for income tax purposes by your parent in the year in which he/she died or became disabled due to injuries sustained while in the service or in the year in which the injuries occurred that resulted in unemployability? [] yes [] no [] N/A

13. Are you the spouse of a veteran who has either died, went missing in action, or became 100% disabled for the purpose of employability due to injuries sustained while in the service? [] yes [] no

14. At the time your parent or spouse entered the service, did either of the following circumstances apply to him or her?

a. Was his or her place of entry Texas? [] yes [] no

b. Did your parent or spouse declare Texas as his or her Home of Record? [] yes [] no

15. If you answered "no" to 14(a) and 14(b), was your parent or spouse a Texas resident when he or she entered the service? [] yes [] no

If you answered "no" to 14(a), 14(b), and 15, you are not eligible for a Hazlewood exemption.

If you answered "yes" to question 15, complete Part B and submit this form to your institution along with a completed copy of the Hazlewood Residency Questionnaire for Veterans, which was included in your application packet. The Residency Questionnaire is NOT required for persons who answered "yes" to 9a or 9b.

Part E – Certification and Consent to Disclosure

My name is _____ and I am applying for an exemption from payment of tuition and certain fees under Texas Education Code, Section 54.203 (The Hazlewood Act). I understand that I may be entitled, under the law, to this exemption for up for 150 credit hours total at Texas public institutions of higher education. For the purpose of accounting for the total number of hours for which I receive this exemption, I am granting permission to any institution in which I have enrolled or will enroll to release current semester and historic credit hour information to the Texas Higher Education Coordinating Board ("Board") and am granting permission for the Board to share such data with any institution that I might attend. I hereby certify the information I have provided is true and correct. I understand that if I fail to provide accurate information, I may be required to reimburse the institution and penalties may be imposed.

Signature

Date

TURN IN THIS APPLICATION ALONG WITH SUPPORTING DOCUMENTATION TO THE FINANCIAL AID OFFICE AT YOUR COLLEGE/UNIVERSITY.

For Institution Use Only

Approved (initials):	Muskogee letter on file? [] yes [] no	Resident now? [] yes [] no
Term VA benefit amount: \$ _____	Proof of dependency? [] yes [] no Proof of marriage [] yes [] no	In default? [] yes [] no
HS 36 mo in TX? [] yes [] no	Ratings Disability Letter indicates unemployability? [] yes [] no	
Place of entry TX? [] yes [] no	Parent's or Spouse's Residency Form supports residency? [] yes [] no [] n/a	
HOR Texas [] yes [] no		

Dependent Children and Spouse of Veterans

Hazlewood Exemption Residency Questionnaire

This form is only required for individuals whose parent's or spouse's place of entry into the service was NOT Texas, and who did NOT declare their Home of Record as Texas at the time they entered the service. Do not complete this form if your place of entry or Home of Record at the time of entry into the service was Texas.

Part A – Applicant Identification

1. Name: _____ 2. Social Security Number: _____
last, first, middle initial

Part B – High School Graduation or Receipt of GED

1. Did your service-member parent or spouse graduate from a Texas high school or received a GED in Texas having lived in the state the 36 months leading up to graduation or receipt of the GED?

yes no

2. Did he/she live in Texas the 12 months prior to enlistment? (The year prior to enlistment may include time enrolled in high school or completing the GED.) yes no

If you checked "yes" to BOTH questions, skip to Part G.

Part C – Parent's Dependent Status at Time He/She Entered the Service

1. At the time he/she entered the service, which of the following circumstances applied to your parent or spouse?

- a. Filed his/her own federal income tax as an independent tax payer.
 b. Was claimed as a dependent by a parent or court-appointed legal guardian.
 c. If you did not check "a" or "b" above, who provided the majority of his/her support?
 self parent or guardian other*: _____

Explanation for "other" person providing him/her support: _____

If you checked "a" or "self" under "c", continue to **Part D**.

If you checked "b" or "parent or guardian" under "c", skip Part D and go to **Part E**.

If you checked "other" please explain below, skip Part D and answer **Part E** for the individual who provided your parent support.

Part D – For Those Whose Service Member Parent or Spouse Filed His/Her Own Income Tax (Checked "a" to Question C 1. above)

1. Was your parent or spouse living in Texas when he/she entered the service? Yes No

2. If he/she was living in Texas when he/she entered the service,

a. how long had your parent or spouse resided in Texas at that time? _____ Yrs & _____ Mos

b. what was his/her MAIN reason for being in Texas? (If "other", give explanation.)

Born & Raised Here Go to College Accept a Job Military Assignment

Other _____

c. if it was for Military Assignment, what was his/her home of record? _____

3. If he/she was not living in Texas when he/she entered the service,
 - a. how long had your parent or spouse resided outside of Texas at that time? _____ Yrs & _____ Mos
 - b. what was his/her MAIN reason for being out of state? (If "other", give explanation.)
 Go to College Accept a Job Military Assignment Other
 - c. if it was for Military Assignment, what was his/her home of record? _____

Part E – For Students Whose Service Member Parent or Spouse was a Dependent at the Time He/She Entered the Service. All students who answered "Parent" or "Legal Guardian" or "other" in Part C must complete this section.

The following questions apply to the service member's parent or legal guardian, which (for simplicity) we will refer to as your grandparent.

1. Name of grandparent who claimed your parent or spouse as a dependent at the time he/she entered the service:

2. Relationship to your parent or spouse: parent legal guardian other _____
3. Was the grandparent a U.S. Citizen or Permanent Resident when your parent or spouse entered the service?
If not, which of the following categories did he/she meet?
 - a. Applicant for Permanent Resident Status.
 - b. Foreign National with a visa to live in the United States. If you checked this box, what type of visa is it?
 Visa type: _____
 - c. Foreign National without a visa.
4. If the grandparent was living in Texas when your parent or spouse entered the service,
 - a. how long had your grandparents resided in Texas at that time? _____ Yrs & _____ Mos
 - b. what was the grandparent's MAIN reason for being in Texas? (If "other", give explanation.)
 Born & Raised Here Go to College Accept a Job Military Assignment Other
 - c. if it was for Military Assignment, what was his/her home of record? _____
5. If the grandparent was not living in Texas when your parent or spouse entered the service,
 - a. how long had the grandparent resided outside of Texas at that time? _____ Yrs & _____ Mos
 - b. what was his/her MAIN reason for being out of state? (If "other", give explanation.)
 Go to College Accept a Job Military Assignment Other
 - c. if it was for Military Assignment, what was his/her home of record? _____

Part F – Comments

If there is additional information you believe your institution should have in order to determine your parent's or spouse's residence at the time he/she joined the service, please provide it here.

Part G – Certification and Consent to Disclosure

My name is _____ and I am applying for an exemption from payment of tuition and certain fees under Texas Education Code, Section 54.203 (The Hazlewood Act). I understand that I may be entitled, under the law, to this exemption for up for 150 credit hours total at Texas public institutions of higher education. For the purpose of accounting for the total number of hours for which I receive this exemption, I am granting permission to any institution in which I have enrolled or will enroll to release current semester and historic credit hour information to the Texas Higher Education Coordinating Board ("Board") and am granting permission for the Board to share such data with any institution that I might attend. I hereby certify the information I have provided is true and correct. I understand that if I fail to provide accurate information, I may be required to reimburse the institution and penalties may be imposed.

Signature

Date

After completing and signing this form, submit it to your institution along with the Hazlewood Exemption (Hazlewood Act) Application for Eligible Children and Spouse Who have never used the Exemption.

For Institution Use Only

Approved (initials): _____	TX Resident [] yes [] no
----------------------------	----------------------------

Trinity Valley Community College

HAZLEWOOD ACT EXEMPTION RESIDENCY INFORMATION

Texas Higher Education Coordinating Board rule 21.38 requires each student to provide substantiating documentation to affirm residence for tuition purposes. It also requires the student to sign an Oath of Residency. All students are required to answer the questions below. If you have attended school or resided out of state, additional proof of residency may be required. Military personnel/dependents must submit proof of military assignment in Texas at each enrollment.

STUDENT BACKGROUND

Name _____

Social Security Number _____ - _____ - _____ Date of Birth _____

Local Address _____

City _____ State _____ Zip _____

How long have you lived at the above address? _____

Permanent Address _____

RESIDENCY ISSUES

Are you a Texas resident? ____ Yes ____ No

How long have you resided in Texas? _____ Years and _____ Months

I hereby certify that I was a resident of Texas when I entered the Armed Services of the United States of America in the year of _____.

I resided in the city of _____, Texas.

OATH OF RESIDENCY

I understand that information submitted herein will be relied upon by the college officials to determine my status for admission and residency eligibility. I authorize the college to verify the information I have provided. I agree to notify the proper officials of the institution of any changes in the information provided. I certify that the information on this application is complete and correct and understand that the submission of false information is grounds for rejection of my application, withdrawal of any offer of acceptance, cancellation of enrollment, or appropriate disciplinary action.

Signature _____ Date _____

TVCC is an affirmative action/equal opportunity institution which provides educational and employment opportunities on the basis of merit and without discrimination or harassment because of race, color, religion, sex, national origin, age, or disability.