

MILITARY FAMILY MEMBER TUITION REDUCTION APPLICATION

STUDENT NAME _____

Last

First

STUDENT ID # _____

To receive the Family Member Discount, the student must be a spouse or dependent of a current United States military service member and must submit this application along with the following documentation. The completed form and supporting documentation should be submitted to Franklin University at least ten (10) business days prior to the start of courses within the existing or upcoming academic term in which the tuition benefit is desired:

SPOUSE:

One of the following:

- Military Orders
- Military Leave and Earnings Statement (LES)
- Verification letter from the military member's command reflecting status

DEPENDENT:

Copy of service member's most recent IRS Tax Transcript indicating student's status as a dependent. You can request tax transcripts by calling 1.800.908.9946 or online at www.irs.gov

AND

One of the following:

- Military Orders
- Military Leave and Earnings Statement (LES)
- Verification letter from the military member's command reflecting status

ACTIVE MILITARY SPOUSE OR PARENT NAME _____

BRANCH OF SERVICE STATUS _____ Active Duty National Guard Reserve

I AM USING VA BENEFITS: YES NO

TERM _____ **YEAR** _____ **TYPE OF COURSE:** Undergraduate Graduate

**** IMPORTANT:** If you are planning to apply for Financial Aid, you must complete a [Declaration of Outside Tuition Assistance \(OUT\) Form](#)**

Recipients of this tuition benefit are not eligible to apply for or to receive any additional tuition benefits administered by Franklin University.

Dishonest Conduct

The purpose of education is to advance one's own intellectual skills and knowledge and to demonstrate the outcomes of these efforts. An essential and shared value in higher education is presenting one's own work and properly acknowledging that or others. Any violation of this principle constitutes as academic dishonesty and will result in disciplinary action, as well as the forfeiture of all tuition benefits.

By signing below, I acknowledge the information I have provided above is accurate and complete. I agree I am responsible for immediately notifying Franklin University of any change in my, or my family member's status as a current military service member. I understand Franklin holds the right to audit my, or my family member's status at any time, and any falsification of this information will result in disciplinary sanctions including, but not limited to, probation, suspension, dismissal or restitution.

STUDENT SIGNATURE: _____

DATE: _____

INSTRUCTIONS FOR SUBMISSION: Please email the completed form and supporting documentation to SFS@franklin.edu