

**REQUEST FOR EXEMPTION FROM NON-RESIDENT TUITION  
FOR (Texas State) COMPETITIVE SCHOLARSHIP RECIPIENTS**

Student's Name \_\_\_\_\_ Texas State ID# \_\_\_\_\_

\_\_\_\_\_ Undergraduate      \_\_\_\_\_ Graduate

I certify that the student named above qualifies for a waiver of the non-resident tuition in accordance with the regulations as follows:

- (1) The student competed for the scholarship with other students including Texas residents.
- (2) The scholarship was awarded by an officially recognized Texas State University scholarship committee.
- (3) The amount of the scholarship is \$ \_\_\_\_\_ for the academic year.
- (4) Name of Scholarship \_\_\_\_\_
- (5) The scholarship \_\_\_\_\_ (is) \_\_\_\_\_ (is not) academic.

This waiver is for the 20\_\_\_\_-20\_\_\_\_ academic year and applies to the

Fall\_\_\_\_\_ Spring\_\_\_\_\_ Summer\_\_\_\_\_ semesters.

\_\_\_\_\_  
Signature of Dept. Head or Administrative Official      Date

\_\_\_\_\_  
Department or Office      Phone number/Email

The **awarding department** should submit this form, on behalf of the student, to the following:

Student Business Services Office  
J.C. Kellam Building, Rm. 188



**NOTE:**  
To receive credit for the exemption, this form **MUST** be returned to the Student Business Services Office, JCK 188, *not later than the 12<sup>th</sup> class day of the Fall/Spring semesters or the 4<sup>th</sup> class day of the Summer semesters.*

**\*\*\*\*Forms received after the 12<sup>th</sup> or 4<sup>th</sup> class day deadlines WILL NOT be honored.\*\*\*\***