Office of Veteran Student Services

Tuition Waiver Approval Form
NJ Army/Air National Guard

Name: _______________________________  Student ID: _______________________________

Home Phone: __________________________  Preferred Email: __________________________

Number of credits (Eligible for up to 15) _________

Semester:  Spring  □  Fall  □  Winter  □  Summer 1 □  Summer 2 □  Year: __________

□ Undergrad: Major ____________________

□ Graduate: Major ____________________

Using Chapter 33: Yes _____  No_____
*If yes, you must fill out chapter 33 certification form.

Remarks: ________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

DO NOT MARK BELOW THIS LINE. SIGNATURE IS FOR CERTIFYING OFFICIAL.

This student has met the established criteria and qualifies for enrollment in the Tuition Waiver program for NJ Army/Air National Guard.

__________________________________________________________
Lilliam Banner’s Signature  Date

Lilliam H Banner
Certified Veterans Officer