

# The Ohio GI Promise for Veterans Residency Reclassification Application

Veterans of the US Armed Services, their spouses, and dependents, may qualify for immediate classification as Ohio residents for tuition purposes, if the veteran either:

- Served one or more years on active military duty and was honorably discharged or received a medical discharge that was related to the military service; or
- Was killed while serving on active duty or has been declared to be missing in action or a prisoner of war.

Additionally, to qualify for Ohio residency-for-tuition-purposes status, both the veteran and the spouse or dependent seeking Ohio residency status must have established residency in Ohio as of the first day of classes for the requested academic semester – except that if the veteran was killed while serving on active duty or has been declared to be missing in action or a prisoner of war, only the spouse or dependent seeking residency status shall be required to have established an Ohio domicile as of the first day of classes for the requested academic semester.

**All residency reviews must be completed by the first day of the semester.**

## I. Attach all of the following documents (for ALL applications):

- A copy of the 'Certificate of Release or Discharge from Active Duty' (i.e., DD Form 214, Member 4) issued to you by the US Department of Defense; and
- A copy of a lease or deed, or an Ohio Driver's License or Ohio State ID, establishing that you personally reside in the State of Ohio.

*I am the veteran claimant and I have met all the requirements for classification for an Ohio-resident-for-tuition-purposes under the provisions codified into Ohio Revised Code 3333.31 and Ohio Administrative Code 3333-1-10.*

*I acknowledge that a false statement on this application will subject me and/or my spouse/dependent(s) to a nullification of the Ohio resident classification and the assessment of out-of-state tuition for current and future enrollments and retroactively to the first semester of enrollment under the classification of Ohio-resident-for-tuition-purposes.*

Signature

Date

## Veteran Claimant/Applicant's Information

*Note: the veteran must complete Section I when requesting residency for the veteran, spouse or dependent.*

Last Name:

First Name:

Student ID or SSN

Email Address

Date of Birth:

Phone Number

Address - Number and Street

City

State

Zip Code

Country

You are applying for the  Fall  Spring  Summer Semester of (year) \_\_\_\_\_ over

## II. Attach all of the following documents (for spouse, and dependent applications only):

- A copy of a lease or deed, or an Ohio Driver's License or Ohio State ID, establishing that you personally reside in the State of Ohio. *Your residence may be separate from that of the veteran claimant.*
- If you are the veteran's dependent, a copy of the veteran parent's most recent Federal Income Tax form showing that he or she has claimed you as a dependent.

### Veteran's Spouse or Dependent Information (if applicable)

*Note: if residency is requested for the veteran, spouse or dependent, the veteran must complete Section II and must submit the documents listed.*

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Last Name:

First Name:

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Student ID or SSN

Email Address

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Date of Birth:

Phone Number

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Address - Number and Street

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City

State

Zip Code

Country

You are applying for the  Fall  Spring  Summer Semester of (year) \_\_\_\_\_

### Veteran's Spouse or Dependent:

*I am the spouse or dependent of the veteran claimant and I have met all the requirements for classification for an Ohio-resident-for-tuition-purposes under the provisions codified into Ohio Revised Code 3333.31 and Ohio Administrative Code 3333-1-10.*

*I acknowledge that a false statement on this application will subject me or the veteran claimant will subject me to a nullification of the Ohio resident classification and the assessment of out-of-state tuition for current and future enrollments and retroactively to the first semester of enrollment under the classification of Ohio-resident-for-tuition-purposes.*

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Signature

Date

### Return this form and all supporting documentation:

In-Person:

Cincinnati State Technical and Community College  
3520 Central Parkway  
Cincinnati, Ohio 45223

**All residency reviews must be completed by the first day of the semester.**