



**TUITION WAIVER FOR SPOUSES, DOMESTIC PARTNERS, AND
CHILDREN OF DECEASED OR DISABLED
LAW ENFORCEMENT OFFICERS AND FIREFIGHTERS**

The 2010 Legislature amended The Revised Code of Washington 28B.15.380 establishing a mandatory tuition waiver for eligible spouses/domestic partners and children of law enforcement officers and firefighters who are killed or disabled in the line of duty.

CONDITIONS: This waiver is available to undergraduate students who are a spouse, domestic partner, or child of an eligible law enforcement officer or firefighter who was killed or became totally and permanently disabled in the line of duty. This waiver only applies to state-funded programs during the regular academic year. It does not apply to enrollment or participation in self-supporting courses or programs (e.g., summer school and extended education programs).

ELIGIBILITY: You qualify for this waiver if you are a spouse, domestic partner, or child of a deceased or totally and permanently disabled law enforcement officer or firefighter who was employed by a Washington State law or fire agency at the time of injury or death; have enrolled at a state university within ten years of graduation from high school; and are a matriculated student, pursuing a baccalaureate degree in a state-supported program. There is no time limit after high school for spouses and domestic partners.

PROCEDURES: Complete the application section below. If your sponsor is deceased, please attach a Certificate of Death. If your sponsor is disabled, please attach a Certified Statement of Total Disability as well as a copy of your sponsor's most recent tax return. Your sponsor is the law enforcement officer or firefighter with whom you are related.

***If eligible for this waiver your \$250 confirmation fee may be waived or if fee is already paid, it may be reimbursed. Please contact the Veterans Services Office at 360-650-3324 to learn more about the waiver and confirmation fee.*

STATEMENT OF TOTAL DISABILITY OR DEATH

_____, the parent or spouse/domestic partner (circle one) of
_____ who is a student at Western Washington University, became
either totally disabled or deceased (circle one) in the line of duty while employed by:
a) _____, a public law enforcement agency in the State of Washington, or
b) _____, a full-time or voluntary fire department in the State of Washington.

Continue below if sponsor is disabled:

Due to my total disability, I am unable to perform any occupation or to be gainfully employed. I am not employed at present, nor do I expect to be employed in the near future. Attached are my income tax returns and all W-2 forms used in preparing my income tax statement for last year.

I hereby certify that I make this statement truthfully, subject to the penalties of perjury under the laws of the State of Washington.

Signed in the city of _____, Washington on this _____ day of _____, 2015

Printed Name of Sponsor

Signature of Sponsor

VERIFICATION BY POLICE OR FIRE AGENCY

This certifies that the above individual became totally disabled in the line of duty while employed by

_____.

Signature of Agency Official

Position Title

Date