

Military Admission Application Fee Waiver Form



The *Wilbert* Group

SEND TO: Dallas Institute of Funeral Service Admissions at admissions@dallasinstitutue.edu.

STUDENT: Print or type the information requested below. You must sign and date the Certification Statement.

CERTIFICATION STATEMENT: *I certify that I understand and meet all eligibility requirements to request an admission application fee waiver.*

_____ Student's Name	_____ Student's Signature	_____ Date (mm/dd/yyyy)	
_____ Student's Address	_____ City	_____ State	_____ Zip Code

Branch of Military Serving/ed
(Please select most recent branch of military)

- Air Force
- Army
- Coast Guard
- Marines
- Navy

Proof of Military Service
(Please select documentation you are providing)

- DD-214 (Honorable discharge is required)
- DD-256
- DD 257
- Statement from unit commander stating active duty or IRR
- Leave and Earning Statement *(dated with last 45 days from date above)*
- Other *(Please list documentation in Additional Information below)*

Additional Information: _____

AUTHORIZED OFFICIAL: Print or type the information requested below and check the indicator of military status. You must sign and date the Certification Statement.

CERTIFICATION STATEMENT: *I certify that I understand and meet all eligibility requirements to request an admission application fee waiver.*

_____ Authorized Official's Name and Title	_____ Authorized Official's Signature	_____ Date
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Approved Waiver
Denied Waiver
More information required